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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ITAX GROUP, LLC

Account Number : 120140000115

Phone : (813)882-8426

Fax Number

: (813)884-0263

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT!OR O/D RESIGN ALEXSSANDRA CLEANING SERVICE INC

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TO: Amendment Section

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COVER LETTER

| Division of Corpo | prations | | | | |
|---------------------------|------------------------|--------------------------------|--|------------------------------|--|
| NAME OF CORPOR | ATION: | ALEXSSAND | RA CLEANING SE | RVICE | INC |
| DOCUMENT NUMB | ER: | P09000031128 | | | |
| The enclosed Articles of |) Amendm | ent and fee are s | submitted for filing. | | |
| Please return all corresp | | | - | ŗ: | |
| | ALEXSS | SANDRA MART | rins | | |
| | ALEXSSA | | Name of Contac | t Persor | |
| - | | | Firm/ Comp | pany | |
| <u>-</u> | | Y DR APT 1024 | Address | | · —— —— —— |
| (| CLEARWA | TER, FL 33764 | | | |
| | | | City/ State and Z | ip Code | |
| | | апсо2007@hotn | | | |
| | E-mail | address: (to be u | sed for future annual | report i | notification) |
| For further information | concerning | this matter, plea | se call: | | |
| ^LEXSSANI | | | at (, _ | 727 | 479 2556 |
| Name of Contact Person | | | rea Cod | c & Daytime Telephone Number | |
| Enclosed is a check for t | the following | ng amount made | | | |
| \$35 Filing Fec | | 5 Filing Fee & Jeate of Status | S43.75 Filing For Certified Copy (Additional copy enclosed) | | ☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| | g Addres | | s | Street A | ddress |
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Tallahassee, FL 32301

DDS TAX SERVICE H49000 2 2 40 3 5 3

Articles of Amendment to Articles of Incorporation οť

| ALEXSSANDRA CLEANING SUR | VICE INC | | |
|--|--|--|---------------------------|
| (Name of Corporation as currently f | led with the Florida Dept. of Stat | <u></u> | |
| P09000031128 | | = | |
| (Document Number of Co | prporation (if known) | <u> </u> | ,, |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation: | rida Profit Corporation adopts the | following am | endment(s) to |
| A. If amending name, enter the new name of the corporation: | | | |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.A. | "company," or "incorporated" of A professional corporation nan | The or the abbrevious must conto | new viation tin the |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | _ _ |
| - | | | |
| - | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| _ | · —— —— —— —— | Es. | <u> </u> |
| _ | | | |
|). If amending the registered agent and/or registered office address | in Florida, cuter the name of the | 35 | |
| new registered agent and/or the new registered office address: | Tener in uame of the | ر درد درد ا | 3 1 |
| Name of New Registered Agent | | | |
| | | - C | |
| (Florida street ue | Idress) | <u>三二</u> 第 | |
| New Registered Office Address: | £9 1 | - | |
| (City, | , Florida | (Zip Cixie) | |
| | | | |
| iew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with a | and accept the obligations of the po- | oitiam | |
| | A Service Street Into | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | | |
| Signature of New Registe | ered Agent, if changing | | |

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Anach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

| X Change | <u>PT</u> | n Dog | |
|-------------------------------|------------------------|-----------------------------|----------------------|
| X Remove | <u>V</u> <u>Mik</u> | <u>c Jones</u> | |
| _X ∧dd | <u>SV</u> <u>S</u> all | y Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | ∆ddress |
| I) Change | P | MARTINS, ALEXSSANDRA | 5265 E BAY DR #1024 |
| Add X Remove | | | CLEARWATER, FL 33764 |
| 2) Change | <u> </u> | Lopes da Silva, ALEXSSANDRA | 5265 E BAY DR #1024 |
| Add | | | CLEARWATER, FL 33764 |
| 3) Change | | | 9 JUL 23 |
| Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| .5) Change | · | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |

Page 2 of 4

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| attach additional sheets, if necessary). | (Be specific) | | |
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| The date of each amendment(s) adoption: date this document was signed. | |
|--|--|
| Effective date if applicable: | |
| (no n | nore than 90 days after amendment file date) |
| Note: If the date inserted in this block does not mee document's effective date on the Department of State's | t the applicable statutory liling requirements, this date will not be listed as the records. |
| Adoption of Amendment(s) (CHECK (| <u>)ne</u>) |
| ☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva | olders. The number of votes east for the amendment(s) 1. |
| ☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group | nolders through voting groups. The following statement entitled to vote separately on the amendment(s): |
| "The number of votes east for the amendment(| s) was/were sufficient for approval |
| by (voting gro | ир) |
| The amendment(s) was/were adopted by the board of action was not required. | f directors without shareholder action and shareholder |
| The amendment(x) was/were adopted by the incorporaction was not required. | rators without shareholder action and shareholder |
| DatedJULY, 2ND 2019 | |
| Signature x | |
| (By a director, president or selected, by an incorporato, appointed fiduciary by that | other officer - if directors or officers have not been r - if in the hands of a receiver, trustee, or other court fiduciary) |
| AL | EXSSANDRA MARTINS |
| (Typed o | or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |