P09000031242

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(Red	questor's Name)	•
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend

OCT 29 2009

COVER LETTER:

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

NAME OF CORPORATION:	PRESSU	INE	WASH	14	,, 5	
DOCUMENT NUMBER:	P09000	50310	242			
The enclosed Articles of Amenda	nent and fee are sul	omitted for	filing.			
Please return all correspondence	concerning this mat	ter to the f	following:			
KARE	/ G/2	00M 3	5			
	(Name of	Contact P	erson)			
PRESS	(Firm	sH	THIS			
	(Firm	n/ Compan	y)			
1902	LEE W.	2 2	- 7 -			
	(,	Address)	•		<u> </u>	
50M7	(City/ Sta	te and Zip	3477 ·	2		
Kanza E-mai	address: (to be use	a G	e annual report	notification	on)	ease)
For further information concerning	ng this matter, pleas	e call:				
KAREN GROOM	75	at ((Area Code &	009-4	1536	
(Name of Contact	Person)	,	(Area Code &	Daytime	Telephone Nu	mber)
Enclosed is a check for the follow	ving amount made p	payable to t	he Florida Depa	artment of	State:	
	5 Filing Fee & te of Status	Certifi	3.75 Filing Fee of ied Copy tional copy is sed)	&	□ \$52.50 Fil Certificate of Certified Cop (Additional Copies enclosed)	f Status py Copy
Mailing Address			Street Addres	•	ŕ	

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 22, 2009

KAREN GROOMS PRESSURE WASH THIS, INC. 1902 LEE WOOD CT ST CLOUD, FL 34772

SUBJECT: PRESSURE WASH THIS, INC.

Ref. Number: P09000031242

We have received your document for PRESSURE WASH THIS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 009A00033757

Articles of Amendment

T .		
	to	
•	Articles of Incorporation of	2000
	٨	Enc. TALLAGE AGE TABLE
Tressure Wa	.01	Inc. 1450AFF
(Name of Corporation as curr	rently filed with the Florida	Dept. of State)
Po 9 0000 31.	242	SEE.
(Document Nu	242 mber of Corporation (if know	/n)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:		rida Profit Corporation adopts the f
A. If amending name, enter the new name of	of the corporation:	
		The n
	e designation "Corp," "Inc,	and the property of the party o
B. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>	ofessional association," or to plicable: ET ADDRESS	
D. If amending the registered agent and/or new registered agent and/or the new reg	e: ICE BOX) registered office address in	he abbreviation "P.A."
B. Enter new principal office address, if applicable C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or	e: ICE BOX) registered office address in	he abbreviation "P.A."
3. Enter new principal office address, if application of the address of the state o	e: ICE BOX) registered office address in	Florida, enter the name of the
B. Enter new principal office address, if application of the address of the state o	e: ICE BOX) registered office address in tistered office address:	Florida, enter the name of the

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
CRATARY	STEVE GROOMS	1902 LEE WOOD CT. 54 (LOV) FI. 34772	_ ☑ Add _ □ Remove
			_ □ Add □ Remove
			_
provisions	ndment provides for an exchange, reclassion implementing the amendment if rapplicable, indicate N/A)		
			·

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> :	(date of adoption is required) (no more than 90 days after amendment file date)
. ('no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	voting group)
<i>(</i> 1	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated D	26-09.
Signature (By a	director, president or other officer – if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)