P09000056908

(Re	equestor's Name)			
(Ad	ldress)			
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PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: SWEEPER MAN	OF SW FLORIDA INC.				
DOCUMENT NUMB	P09000056908					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this mat	tter to the following:				
	AUSTIN MORELLI					
•		Name of Contact Person	1	_ _		
	SWEEPER MAN OF SW FL	ORIDA, INC.				
•		Firm/ Company				
	4567 SAN ANTONIO LN	·				
•		Address				
	BONITA SPRINGS, FLORI	DA 34134				
•		City/ State and Zip Cod	e			
ALICI	IIN@SWEEPERMAN.NET					
AUST	-	sed for future annual report	notification)			
	E-man address. (to be us	sed for future attitual report	normeation)			
For further information	1 concerning this matter, pleas	se call:		FALL	15	
AUSTIN MORELLI		at (239	222-5508	CRET	AUG - I	******
Name o	of Contact Person	Area Co	de & Daytime Telephone Nun	nber 📆	ا 	, , ,
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		PM 12:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	enem e la la companya de la companya	2: 29	*****
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Imment Section on of Corporations Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SWEEPER MAN OF SW FLORIDA INC					
(Name o	of Corporation as currently	filed with the Florida Dept. of State)			
P09000056908					
	(Document Number of	Corporation (if known)	<u> </u>		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the fo	llowing ame	ndmen	ıt(s) to
A. If amending name, enter the new na	me of the corporation:				
			The	new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporation name	the abbrevi	iation	
B. Enter new principal office address, if applicable:		4567 SAN ANTONIO LN			
(Principal office address MUST BE A S					
		BONITA SPRINGS, FL. 34134			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4567 SAN ANTONIO LN			
		BONITA SPRINGS, FL. 34134	SECR	16 20	
D. If amending the registered agent an		ss in Florida, enter the name of the		G 1	ne ne pranosio L
new registered agent and/or the nev			38.7		! የግና
Name of New Registered Agent	AUSTIN MORELLI		<u> </u>	FH 12:	ساني ا
	4567 SAN ANTONIO LN		17 AT	2:3	**
	(Florida stree	et address)	177	छ	
New Registered Office Address:	BONITA SPRINGS , Florida 34134		1134		
		City)	(Zip Code)		
New Registered Office Address: New Registered Agent's Signature, if c I hereby accept the appointment as registered.	BONITA SPRINGS	City), Florida_34	(Zip Code)	9	

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)

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 Doe 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 Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	AUSTIN MORELLI	4567 SAN ANTONIO LN
Add			
Remove			BONIA SPRINGS, FL 34134
2) X Change	VP	JESSICA COLE	4567 SAN ANTONIO LN
Add			BONITA SPRINGS, FL 34134
Remove 3) Change	s	KAREN DOWNARE	8012 KANSAS RD
X Add			
Remove			FT MYERS, FL 33967
4) Change	Т	RICHARD DOWNARE	8012 KANSAS RD
X Add			
Remove			FT MYERS, FL 33967
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
			
· · · · · · · · · · · · · · · · · · ·			
			
			
			
	ange, reclassification, or can	ellation of issued shar	es,
t an amendment provides for an excl		amendment itself:	
provisions for implementing the ame	ndment if not contained in the		
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•	7-26-2016	
The date of each amendment(s)		, if other than the
date this document was signed.		
	3-01-2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	;)
	pproved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholde dopted by the incorporators without shareholder action and shareholder	र । -
07.26.2		
07-26-2 Dated	W//////	TAS
(By	director, president of other officer - if directors or officers have not been	
	eted, by an incorporator - if in the hands of a receiver, trustee, or other cour	
арро	inted fiduciary by that fiduciary)	The I was
	AUSTIN MORELLI	585 F P 171
	(Typed or printed name of person signing)	7 5 5
	PRESIDENT	
	(Title of person signing)	