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SECRETARY OF STATE
ALLAHASSEF, FI 6SIDA

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## **COVER LETTER**

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations						
NAME OF CORPORATION: CITRUS CARpet Cleaning, INC						
DOCUMENT NUMBER: P 0 9 0000 68820						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Name of Contact Person  CHAUS CAR PET C/EANIN  Firm/ Company						
Name of Contact Person						
CHAUS CAR pet Cleaning						
Firm/ Company						
226-23 AVR. N						
St. Petensbung, FL 33704 City/ State and Zip Code						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
SPIAN   BURNS   at (727) 6/2-7444     Name of Contact Person   Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)						
Mailing Address Street Address						

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## **Articles of Amendment**

t

## Articles of Incorporation

of

<del></del>		/ N. C.	
orporation as curre	ntly filed with t	ne Florida Dept. of St	tate)
pet Cl	earing	JAC.	P09000068821
(Document Number	of Corporation	(if known)	
6, Florida Statutes, th	is <i>Florida Profi</i>	Corporation adopts t	he following amendment(s) to
of the corporation:			
'A			The new
on "Corp," "Inc," or	"Co". A profe	y," or "incorporated" essional corporation n	or the abbreviation name must contain the
		NJA	
FICE BOX) r registered office ad		N/A	FILED  2017 AUG -3 PHIZ: 22  SECRETARY OF STATE TALLAHIASSEE FLERISA
ROLAN	C = R	ORNS	_
200 3	59 Ave.	S. 5t.	Peta. FC 33705
(Florida	street address)	<del></del>	
		, Flori	
	(City)		(Zip Code)
		ot the obligations of th	ne position.
2			
Signature of New	w Registered Age	nt, if changing	
	Corporation as curred for A (Document Number 16, Florida Statutes, the coffice action of the corporation:  A the word "corporation or the abbreviation or the abbreviation or the abbreviation or the abbreviation of the corporation or the abbreviation of the corporation of the cor	Corporation as currently filed with the part (	Corporation as currently filed with the Florida Dept. of St.    Pat

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 <math>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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u></u>	Julie MAGUIRE	226-23 Ave. N
Add			St. Petersburg
Remove			FL. 33704
2) Change	VP	MICHAEL MAGUI,	N 226-23AUR.N
Add			St. Pety, FL.
Remove		1	33704
3 ) Change	P	BRIAN C. BURNS	200 59 Ave. S
_X_ Add			51. Petersburg, FL
Remove			33705
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	(Re spacife)
NIA	<del>-</del>
	<del>,</del>
···	
**************************************	
7. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment itsen.
NIA	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 8-1-17  (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voling group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature  (By a director, president or other officer – if directors or officers have not bee	
selected, by an incorporator — if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	urt
(Typed or printed name of person signing)	
President	
(Title of person signing)	