P090000075426

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MASTER POOL	& HOME CLEANING, INC	
DOCUMENT NUMBI			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Ndua Neves		
		Name of Contact Person	n
F	RS ACCOUNTING AND T.	AX SERVICES INC	
_		Firm/ Company	
1	0 FAIRWAY DRIVE STE	210	
_	,	Address	
ſ	DEERFIELD BEACH FL 33	3441	
_		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		,	
	nelva o most	ir ordsonvices sed for future annual report	· com
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea-	se call:	
RODRIGO P SILVA		at (<u>954</u>) 623-7615 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Maili	ng Address	Street	Address
Amendment Section		Amend	ment Section
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept.	of State)
P09000075426		<u></u>
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation add	opts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
MASTER POOL SERVICES FL INC		The new
ame must be distinguishable and contain the word "corporation," 'Inc.," or Co.," or the designation "Corp," "Inc." or "Co". 'chartered," "professional association," or the abbreviation "P.A.	A professional corporation na	or the abbreviation "Corp.," me-must-contain the word
3. Enter new principal office address, if applicable:	NONE	~ :
Principal office address MUST BE A STREET ADDRESS)		123
	-	
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	NONE	<u> </u>
		8: 00
		90
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent		e of the
(Florida si	reet address)	
New Registered Office Address:		Florida
Hen hegistered Office hutress.	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	t:	
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations	of the position.
Signature of New 1	Registered Agent, if changing	
•	regularism regions of summigrate	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	to ES	

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

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally St	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	PAULO VICTOR PACHECO NEVES	1291 NW 13TH ST
Add			-	APT 343D
X Remove				BOCA RATON FL 33486
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Daması				

If amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
ULO VICTOR PACHECO NEVES	
- TOTAL TACHECO NETES	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
··-	
 	
-	

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable:	0/12/2020	
Enterior Gate it appreadie.	(no more than 90 days after amendment	file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the a	e following statement mendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approva	ıl
by		
	(voting group)	
10/12/2	020	
Dated	11)_	
Signature		·
sele	a director, president or other officer – if directors or offic cted, by an incorporator – if in the hands of a receiver, tro ointed fiduciary by that fiduciary)	
	JOAO ABADIO NETO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	