# P090000088139

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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CORIBA

Amend Chs

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION:	i:OCD Cleaning Services, Inc.			
DOCUMENT NU	JMBER:	R:P0900088739			
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.			
Please return all co	orrespondence concerning thi	is matter to the following:			
	т	ravis A. Moessner			
	N	Name of Contact Person			
	OCD	Cleaning Services, Inc.			
		Firm/ Company			
	3	007 Walnut Street			
		Address			
		Orlando, FL 32806			
		City/ State and Zip Code			
	Travis E-mail address: (to be use	s@BeOCD.com and for future annual report notification)			
For further inform	ation concerning this matter,	please call:			
Trav	vis Allen Moessner	at ( 407 ) 5  Area Code & Daytime Tel	36-7740		
	e of Contact Person				
	-	nade payable to the Florida Depar			
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing A Amendmen		Street Address Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
	e, FL 32314	2661 Executive Center Circ. Tallahassee, FL 32301	le .		



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2010

TRAVIS ALLEN MOESSNER OCD CLEANING SERVICES, INC. 3007 WALNUT STTEET ORLANDO, FL 32806

SUBJECT: OCD CLEANING SERVICES, INC.

Ref. Number: P09000088739

We have received your document for OCD CLEANING SERVICES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L08000107816 - OCD SERVICES, LLC.

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) 245-6964.

Irerie Albritton Regulatory:Specialist II

Letter Number: 510A00024441

#### Articles of Amendment to Articles of Incorporation of

OCD Clea	aning Servi	ces, Inc.	State)
(Name of Corporation as cur	rently filed wit	h the Florida Dept. of S	State)
P0	900008873	9	•
		ration (if known)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		tutes, this <i>Florida Prof</i>	it Corporation adopts the fol
A. If amending name, enter the new name	of the corporat	tion:	
OCD Pr	operty Servic	es, Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pi	ne designation '	'Corp," "Inc," or "Co"	. A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		3007 Walnut Stre	eet
		) Orlando, FL 328	906
		N/A	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		3007 Walnut Stre	et
		Orlando, FL 3280	06
		<u>N</u> /A	
D. If amending the registered agent and/or new registered agent and/or the new reg			enter the name of the
Name of New Registered Agent:	N/A		
	N/A		
New Registered Office Address:		orida street address)	
	N/A		, Florida N/A
	(Cit	ty) (	Zip Code)
New Registered Agent's Signature, <u>if chang</u>	ring Registered	Agent	
New Registered Agent's Signature, it chang hereby accept the appointment as registered			he 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
<u>COO</u>	Ronald J. Lloyd	3007 Walnut Street Orlando. FL 32806 N/A	
N/A	N/A	N/A N/A	🛘 Remove
N/A	N/A	N/A N/A N/A	
	ding or adding additional Article additional sheets, if necessary). (		
N/A			
provisi	ions for implementing the amend not applicable, indicate N/A)	nge, reclassification, or cancellation ment if not contained in the amendn	
	ber of shares of stock is: 100	nn	
	Del of Strates of Stock IS. 100	JU	
N/A			
N/A		# · · · <u></u>	
N/A			
N/A			

The date of each amendmen	t(s) adoption: 11/11/2010
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_11/1	11/2010
Signature/_	Travis Allen Maesse
	a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Travis Allen Moessner
	(Typed or printed name of person signing)
	President/CEO
	(Title of person signing)