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| (Re | questor's Name) | |
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| PICK-UP | MAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: NAPLES QUALF | TY CLEANING, INC. | |
|-------------------------|---|---|---|
| DOCUMENT NUM | P00000101850 | | |
| The enclosed Articles | s of Amendment and fee are su | abmitted for filing. | |
| Please return all corre | espondence concerning this ma | itter to the following: | |
| | WILLIAM IGNACE | | |
| | | Name of Contact Perso | n |
| | NAPLES QUALITY CLEAR | NING, INC. | |
| | | Firm/ Company | |
| | 2500 44TH ST. SW | • | |
| | | Address | |
| | NAPLES, FL 34116 | | |
| | | City/ State and Zip Cod | · · |
| NOC | LEANING@GMAIL.COM | | |
| | - | sed for future annual report | notification |
| | | · | |
| For further information | on concerning this matter, plea | se call: | |
| WILLIAM IGNACE | | at (| de & Daytime Telephone Number |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | artment of State: |
| S35 Filing Fee | □S43.75 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) |
| An Div P.C | endment Section ision of Corporations b. Box 6327 lahassee, FL 32314 | Ameno Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

NAPLES QUALITY CLEANING, INC.

| (3) | ALCOLOUGH ALCOLOUGH DOWN CONTRACTOR |
|---|--|
| (Name of Corporation as curren | itly filed with the Florida Dept. of State) 3 P 2 15 |
| P09000101850 | |
| (Document Number | of Corporation (if known) SCORE TART OF STATE OF TALL ARASSES, FLORIDA |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation: | |
| N/A | The new |
| name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the |
| 3. Enter new principal office address, if applicable: | N/A |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| Enter new mailing address, if applicable: | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | N/A |
| | |
| | |
|). If amending the registered agent and/or registered office ad | |
| new registered agent and/or the new registered office addre | <u>\$5:</u> |
| Name of New Registered Agent N/A | |
| (Florida) | street address) |
| | n ret tudu ess) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| | |
| ew Registered Agent's Signature, if changing Registered Ager | |
| hereby accept the appointment as registered agent. I am familia | with and accept the obligations of the position. |
| l. | |
| <u>N(A</u> | |
| 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)

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> <u>J</u> | John Doe | |
|-------------------------------|--------------------|---------------------|------------------|
| X Remove | <u>v</u> 2 | Mike Jones | |
| X Add | <u>sv</u> <u>s</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) X Change | PSTD | WILLIAM P. IGNACE | 2500 44TH ST SW |
| Add | | | NAPLES, FL 34116 |
| Remove | | | |
| 2) Change | VD | STEPHANIE O. IGNACE | 2500 44TH ST SW |
| Add | | | NAPLES, FL 34116 |
| X Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | · | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|--|-------------|
| N/A | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | |
| (if not applicable, indicate N/A) | |
| N/A | |
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| 1814 A | N/A | |
|--|---|---------------------------|
| The date of each amendment(s date this document was signed. |) adoption: | , if other than the |
| N | 1/A | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | (no more man 90 days after amenamem fue date) | |
| Note: If the date inserted in the document's effective date on the | s block does not meet the applicable statutory filing requirements, this date Department of State's records. | will not be listed as the |
| 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) 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 c | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (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 | |
| JULY 1 Dated Signature | . 2019 [WW] | |
| sele | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary) | |
| | WILLAIM P. IGNACE | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | <u></u> |