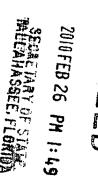
(Re	questor's Name)
(Ad	dress)
(Ad	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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February 15, 2010

LUCRETIA D. PADGETT VIARS CLEANING, INC. 7063 POPPAS PASS BROOKSVILLE, FL 34602

SUBJECT: VIARS CLEANING, INC.

Ref. Number: P10000006390

We have received your document for VIARS CLEANING, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If your have any questions concerning the filing of your document, please call \$500,245-6908

Sylvia Gilbert

Regulatory Specialist II Letter Number: 010A00003801

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: VICETS C	eaning, Inc.
DOCUMENT NUMBER: PIDOOOC	06390
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Lucretia Vir	ARS PAdgett act Person
ViARS Cloan Firm/Con	ing, Inc.
70103 Poppas	Pass
Brooksville F	1. 34602 Zip Code
Viars de Bell Six E-mail address: (to be used for future a	the nef- nnual report notification)
For further information concerning this matter, please call	
Lucrefia Dawn Prodgett at (3) Name of Contact Person	352 279-1584 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
Certificate of Status Cert	75 Filing Fee & S52.50 Filing Fee ified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendment Section Amen Division of Corporations Divisi P.O. Box 6327 Clifto Tallahassee, FL 32314 2661	Address dment Section on of Corporations n Building Executive Center Circle lassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

1 4 4	Articles of Amendment
•	Articles of Amendment to Articles of Incorporation of O(DG) INC. rently filed with the Florida Dept. of State)
•	Articles of Incorporation of 20/0~
1/10 00 0100	TEB 25
Viars clean	rently filed with the Florida Dept. of State)
Name of Corporation as curr	Committee with the Fioritia Dept. of State)
P100000 630	mber of Corporation (if known)
(Document Nui	inder of Corporation (it known)
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corporation adopts the following
If amending name, enter the new name o	of the corporation:
	the word "corporation," "company," or "incorporated" or the
B. <u>Enter new principal office address, if app</u> Principal office address <u>MUST BE A STREE</u>	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	
(Mailing address <u>MAY BE A POST OFFI</u>	registered office address in Florida, enter the name of the
Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Florida, enter the name of the istered office address:
Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new registered	registered office address in Florida, enter the name of the
Mailing address MAY BE A POST OFFI D. If amending the registered agent and/or new registered agent and/or the new registered Agent: Name of New Registered Agent:	registered office address in Florida, enter the name of the istered office address: (Florida street address) , Florida
(Mailing address MAY BE A POST OFFI . If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Florida, enter the name of the istered office address: (Florida street address)
Mailing address MAY BE A POST OFFI D. If amending the registered agent and/or new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address:	registered office address in Florida, enter the name of the istered office address: (Florida street address) , Florida (City) (Zip Code) ing Registered Agent:
O. If amending the registered agent and/or new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address:	registered office address in Florida, enter the name of the istered office address: (Florida street address) , Florida (City) (Zip Code)

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)

Title	<u>Name</u>	Address	Type of Action
D	Tiffany White	35422 Shamoku Brooksville Fl. 34401	ァルズ Add Remove
			
	nding or adding additional Articles, en additional sheets, if necessary). (Be s		
provis	amendment provides for an exchange, sions for implementing the amendment (not applicable, indicate N/A)		

The date of each amendment(s)	adoption: 2-9/0
•	(date of adoption is required)
Effective date <u>if applicable</u> : (n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were aby the shareholders was/were	dopted 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 or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	"
(vo	oting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	9-10
Signature	ucutu Padgett
selecte	Firector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
_	Lucrefia Padgeff (Typed or printed name of person signing)
	(1) ped of printed name of person signing)
_	Hesident
	(Title of person signing)