

11/10/2010 16:07 FAX

Division of Corporations

001/905

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H10000245153 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : WHWW, INC.
Account Number : I20060000124
Phone : (407) 246-6584
Fax Number : (407) 645-3728

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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TALLAHASSEE, FLORIDA
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
TYWIDE CLEANING CONTRACTORS OF CENTRAL FLORIDA,
IN**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Amend
@ 11/10/10

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COVER LETTER

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Citywide Cleaning Contractors of Central Florida, Inc.

DOCUMENT NUMBER: P10000024366

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

W. Graham White, Esq.

Name of Contact Person

WHWW, P.A.

Firm/ Company

P.O. Box 880

Address

Winter Park, Florida 32790-0880

City/ State and Zip Code

don@teamproclean.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

W. Graham White

Name of Contact Person

at (407)

246-8415

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment
to
Articles of Incorporation
of

H10000245153 3

Citywide Cleaning Contractors of Central Florida, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000024366

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Donald Zerivitz

New Registered Office Address:

442 S. Northlake Blvd., Suite 1024

(Florida street address)

Altamonte Springs

(City)

Florida 32701

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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:

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(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DPST	Paul Hournbuckle	442 S. Northlake Blvd. Suite 1024 Altamonte Springs, FL 32701	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
DPST	Donald Zerivitz	442 S. Northlake Blvd. Suite 1024 Altamonte Springs, FL 32701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

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

The date of each amendment(s) adoption: November 1, 2010 H10000245153 3

Effective date if applicable: Upon Filing (date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated November 1, 2010

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Donald Zerivitz

(Typed or printed name of person signing)

President

(Title of person signing)