

P100000040705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

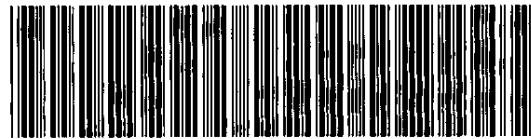
(Business Entity Name)

(Document Number)

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*Amend*

07/19/10--01038--008 \*\*\$2.50

2010 JUL 19 PM 05:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*FOR  
7/20/10*

**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION:** Eco Pressure Cleaning, Inc.

**DOCUMENT NUMBER:** P10000040705

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

Please return all correspondence concerning this matter to the following:

Lillian A. Olivieri Velez  
Name of Contact Person

Firm/ Company

2917 Plunkett St. Apt. 24C  
Address

Hollywood, FL 33020  
City/ State and Zip Code

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

For further information concerning this matter, please call:

Lillian A. Olivieri Velez at ( 954 ) 636-9393  
Name of Contact Person 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

July 13, 2010

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

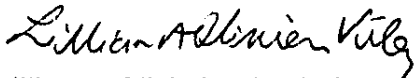
This letter is to confirm the information in this cover letter in case there is a section not understood since is hand written.

Telephone number: 954-636-9393  
Return address: 2917 Plunkett Street Apt. 24C, Hollywood, FL 33020  
Name of Corporation: Eco Pressure Cleaning, Inc.  
Document Number: P10000040705

The reason for this amendment is to add Michael K. Korir (Title: President) as an officer/director of this corporation, he was not added in the original application by mistake, therefore we are submitting this application to amend the articles of incorporation.

If you have any questions feel free to contact us at your convenience at 954-636-9393.

Sincerely,



Lillian A. Olivieri Velez / Vice President



Michael K. Korir / President

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

Eco Pressure Cleaning, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

2018 JUL 19 PM 3:10

P1000040705  
(Document Number of Corporation (if known))

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_ (Florida street address)

\_\_\_\_\_, Florida  
(City) (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*

**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>	<u>Address</u>	<u>Type of Action</u>
President	Michael K. Korit	2917 Plunkett St. Apt. 24c Hollywood, FL 33020	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input 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)*

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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)*

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The date of each amendment(s) adoption: 7-13-10  
(date of adoption is required)  
Effective date if applicable: 5-11-10  
(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 7-13-10

Signature Lillian A. Oliviero Velez  
(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)

Lillian A. Oliviero Velez  
(Typed or printed name of person signing)

VP  
(Title of person signing)