P10000049444

(Re	questor's Name)		
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SECRETARY OF STARS

PM 2: 39

C. LEWIS

JUN 1 9 2014

EXAMMEN

COVER LETTER

TO: Amendment Section **Division of Corporations**

			RVICES USA CO.			
DOCUMENT NUMB	_{ER:} P1000004944	+4				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
		Julio Araujo				
•		Name of Contact Person	n			
	Total Corporation Sevices Inc.					
-		Firm/ Company				
	6355 NW 36 St. Suite 407					
-	Address					
_	Virginia Gardens, FL 33166					
	City/ State and Zip Code					
	asesor	@corporaciones	senusa.com			
		sed for future annual report				
		•				
For further information	concerning this matter, pleas	se call:				
Juli	o Araujo	at (305	871-2525 de & Daytime Telephone Number			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)			
Amer Divis	ing Address ndment Section sion of Corporations	Amend	Address Iment Section on of Corporations			

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

APPROVEU AND FILED

Articles of Amendment to Articles of Incorporation of

14 JUN -9 PM 2: 39

CRISTINA CLEANING SERVICES USA CO. SECRETARY OF STATE

(Name of Corporation as currently filed with the Flor	rida Dept. of State)
P1000004	9444
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: ELITE ENTERPRISES (GROUP INC. The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation "A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Ν/Λ	
Name of New Registered Agent NIA	
(Florida stree	t address)
New Registered Office Address: N/A	, 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	th and accept the obligations of the position.
Signature of New Registered Ag	ent, 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(intracti additional	<mark>lding additional Article</mark> sheets, if necessary). (Be specific)	<u>,,</u> .		
/A					
					
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If an amendment	provides for an exchan	ae reclassificati	on organiellatie	an of iccuad chara	e
provisions for in	plementing the amendi	nent if not cont	ined in the amer	idment itself:	21
	able, indicate N/A) 100% Capital Stoo	ck			
	- Too 76 Oapital Otok			···	
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The date of each amendment(s) adoption: ____OS/30/2014 ___, if other than the date this document was signed. Effective date if applicable: (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 (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. 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 induciary by that fiduciary) Cristina Castro (Typed or printed name of person signing) President

(Title of person signing)