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Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CORPORATION:ELEGANT HOME SOLUTIONS, INC.			
DOCUMENT NUMBER:	P10000080644			
The enclosed Articles of Amendment	and fee are submitted for filing.			
Please return all correspondence cond	eerning this matter to the following:			
	GREG K GONZALEZ, CPA			
	Name of Contact Person			
t u	GREG K GONZALEZ, CPA, PA			
Firm/ Company				
5201 BLUE LAGOON DR. SUITE 800				
	Address			
	MIAMI, FL. 33126			
	City/ State and Zip Code			
GREC E-mail address	G@GREGGONZALEZCPA.COM :: (to be used for future annual report notification)			
For further information concerning th	is matter, please call:			
GREG K GONZALEZ, CP				
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	tet & Status Status Status Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional Copy is enclosed) 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			

Articles of Amendment Articles of Incorporation of

ELEGANT HOME SOLUTIONS, INC.

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

P10000080644

(Document Numl	per of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this a	Florida Profit Corporation adopts the follow
A. If amending name, enter the new name of	the corporation:	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "professions"	designation "Corp," "Ir	nc," or "Co". A professional corporation
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>	
D. If amending the registered agent and/or re new registered agent and/or the new regist		in Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent: ent. 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>	Address	Type of Action
<u>D</u>	GIRALDO GOMEZ	18800 NE 29 AVE #215E AVENTURA, FL 33180	
			□ Add □ □ Remove
(attach ad	ding or adding additional Articles, enditional sheets, if necessary). (Be s	specific)	
provisio	nendment provides for an exchange ons for implementing the amendmen of applicable, indicate N/A)	, reclassification, or cancellation of nt if not contained in the amendmen	issued shares, at itself:

The date of each amendmen	t(s) adoption: 0	06/24/11
Effective date <u>if applicable</u> :	06/24/11	(date of adoption is required)
•	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u>)	HECK ONE)
The amendment(s) was/we by the shareholders was/w		ne shareholders. The number of votes cast for the amendment(s) rapproval.
		the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the ame	ndment(s) was/were sufficient for approval
by	()	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voling group)	
The amendment(s) was/we action was not required.	re adopted by th	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by th	e incorporators without shareholder action and shareholder
Dated_06/2	4/11	
Signature	Carlos	Cruz
sele	ected, by an inco	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	C	yped or printed name of person signing)
	(T)	ped or printed name of person signing)
	-	a
		President
	(Title o	of person signing)