# 7100000859

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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9-16-11

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORI                          | PORATION:                                    | MY CLEANING CREW   | INC                                  |
|---------------------------------------|--|--|--------------------------------------|
| DOCUMENT NU                           | MBER:  | P10000085937   |                                      |
| The enclosed Artic                    | cles of Amendment and fee                    | are submitted for filing.  |                                      |
| Please return all co                  | orrespondence concerning t                   | this matter to the following:  |                                      |
|                                       |  | Area Code & Daytime Telephone Number  e following amount made payable to the Florida Department of State:  43.75 Filing Fee & \$\Begin{array}{c} \$43.75 Filing Fee & \$\Begin{array}{c} \$52.50 Filing Fee & Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & Certified C |                                      |
|                                       |  | Name of Contact Person   |                                      |
|                                       | PROFES                                       |  |                                      |
| j                                     |  | Firm/ Company  |                                      |
|                                       | 434  |  |                                      |
| · · · · · · · · · · · · · · · · · · · |  | Carlos Ca     |                                      |
|                                       | FT. WAL                                      | TON BEACH FL 32547-2918 City/ State and Zip Code   |                                      |
| ·<br>—                                | alliedtra<br>E-mail address: (to be u        | desinc@yahoo.com<br>sed for future annual report notification)   | · .                                  |
| For further informa                   | ation concerning this matte                  | r, please call:  |                                      |
|                                       | Of Contact Person                            | at ( <u>850</u> ) 4  Area Code & Daytime Tel   | 61-1870<br>ephone Number             |
| Enclosed is a chec                    | k for the following amount                   | made payable to the Florida Depar  | tment of State:                      |
| <b> </b>                              | ☐ \$43.75 Filing Fee & Certificate of Status | Certified Copy   | Certificate of Status Certified Copy |
| P.O. Box 6                            | t Section<br>Corporations                    | Amendment Section  | le.                                  |



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 30, 2011

NICHOLAS FANELLA PROFESSIONAL OFFICE SERVICES 434 TANGLEWOOD DR FORT WALTON BEACH, FL 32547-2918

SUBJECT: MY CLEANING CREW INC.

Ref. Number: P10000085937

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is M02000001064 - ALLIED SERVICES, LLC.

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

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 211A00020218

#### **Articles of Amendment** to **Articles of Incorporation** of

## 2011 SEP 15 AM 11: 25 PALLAMASSEE, FLORIDA MY CLEANING CREW INC. P10000085937

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

(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:  |   |
|--|--|---|
| ALLIE  | D SERVICES ING OF  | THE GULF COAST INCThe new               |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr | he designation "Corp," "Inc,"  | or "Co". A professional corporation     |
| B: Enter new principal office address, if an<br>(Principal office address <u>MUST BE A STRE</u>                                    |  |   |
| , i  |  |   |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF   |  | ·····                                   |
| i  |  |   |
| D. If amending the registered agent and/or new registered agent and/or the new reg   |  | Florida, enter the name of the          |
| Name of New Registered Agent:  | White the state of |   |
| * New Registered Office Address:   | (Florida street add  | tress)                                  |
|  |  | , Florida                               |
|  | (City)   | (Zip Code)                              |
| New Registered Agent's Signature, if chang hereby accept the appointment as registered   | ing Registered Agent:<br>agent. I am familiar with and   | accept the obligations of the position. |
| <del></del> -  | Signature of New Registered A  | gent, 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>                      | Type of Action         |
|--------------|--|-------------------------------------|------------------------|
|              |  |                                     |                        |
|              |  |                                     | L Remove               |
|              |  |                                     |                        |
| ·            |  |                                     | LI Kemove              |
|              |  |                                     |                        |
|              |  | •                                   |                        |
| F 16         | anding an adding additional Autia  | los anton change(s) hore:           |                        |
|              | ending or adding additional Artic<br>h additional sheets, if necessary). |                                     |                        |
|              |  |                                     |                        |
| <del> </del> |  |                                     |                        |
|              |  |                                     |                        |
| •            |  |                                     |                        |
|              |  |                                     |                        |
|              |  |                                     |                        |
|              |  |                                     |                        |
| F. If an     | amendment provides for an exch   | ange, reclassification, or cancella | tion of issued shares, |
|              | isions for implementing the amend if not applicable, indicate N/A)       | iment if not contained in the ame   | nament itself:         |
| ·            |  |                                     |                        |
|              | <del></del>  |                                     |                        |
|              |  |                                     |                        |
|              |  |                                     |                        |
|              |  |                                     |                        |
|              |  |                                     |                        |

| •  | (s) adoption: AUGUST 26, 2011  |
|--|--|
| Effective date <u>if applicable</u> :              | (date of adoption is required)   |
| nective date <u>in applicable</u> .                | (no more than 90 days after amendment file date)   |
| loption of Amendment(s)                            | (CHECK ONE)  |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|  | re approved by the shareholders through voting groups. The following statement d 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/we action was not required.   | re adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.   | re adopted by the incorporators without shareholder action and shareholder   |
| Dated_AUG  | UST 26, 2011   |
|  |  |
| Signature  | mal Muck   |
| (By<br>sele  | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| (By<br>sele  | cted, by an incorporator - if in the hands of a receiver, trustee, or other court  |
| (By<br>sele  | cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)  |
| (By<br>sele  | cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)  LANCE BUCK  |