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Amend
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420-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLUE BARON PROFESSIONAL CARPET & TILE SERV

DOCUMENT NUMBER: P11000011381

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

Please return all correspondence concerning this matter to the following:

KAREN A. KRICK

(Name of Contact Person)

THE PAPER CHASE, INC

(Firm/ Company)

3756 S. SPRINGBREEZE WAY

(Address)

HOMOSASSA, FL. 34448

(City/ State and Zip Code)

kkrick1963@yahoo.com

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

For further information concerning this matter, please call:

MARK A CERTAIN

(Name of Contact Person)

at (352) 697-1698

(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

Articles of Amendment
to
Articles of Incorporation
of

BLUE BARON PROFESSIONAL CARPET & TILE CLEANING Service, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

P11000011381

(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)

3106 E GRAPELEAF LN

INVERNESS, FL. 34452

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

3106 E GRAPELEAF LN

INVERNESS, FL. 34452

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>
<u>P</u>	<u>MARK CERTAIN</u>	<u>3106 E GRAPELEAF LN</u> <u>INVERNESS, FL 34452</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>P</u>	<u>LINDA F NEWMAN</u>	<u>101 CHINABERRY CIR</u> <u>HOMOSASSA, FL 3446-4252</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<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)

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)

The date of each amendment(s) adoption: 03/18/2011

(date of adoption is required)

Effective date if applicable: 03/21/2011

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 03/21/2011

Signature

Mal Carter

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

MARK A CERTAIN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)