P100043456

(Requestor's	s Name)
(Address)	
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(Business E	ntity Name)
(Document i	Number)
Certified Copies Ce	ertificates of Status
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amend

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10/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Expert Cleaning Solutions Inc.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anne Engle-Ochoa
Name of Contact Person
Expert Cleaning Solutions Inc.
Firm/ Company
10441 sw 80 st.
Address
Miami, Fl 33173
City/ State and Zip Code
engle.anne@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anne Engle-Ochoa _{at (} 786) 234-4443
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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation
of

2012 JAN -9 PM

Expert Cleaning Solutions Inc.	SECRETARY OF
(Name of Corporation as currently filed with the Flor	ida Dept. of State LAHASSEE, T
(Document Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Statutes</i> , the second this statutes and the second this statutes are the second this statutes are the second thin the s	orida Profit Corporation adopts the fo
A. If amending name, enter the new name of the corporation:	
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.	A."
	1044134 00 01
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Miami, FI 33173
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10441 sw 80 st. Miami, Fl 33173 ess in Florida, enter the name of
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Anna Engle-Cich	108
Name of New Registered Agent 10441 sw 80 st.	
(Florida str	eet address)
New Registered Office Address: Miami (City)	, Florida
New Registered Office Address: (City)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I dm familiar Signature of New Registered	-Ochoa



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: XChange	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	Р	Miriam Planas	Miriam Planas 8937 sw 12 st. Miami, Fl 33173
2) Change X Add Remove	P	Anne Engle-Ochoa	Anne Engle-Ochoa 10441 sw 80 st. Miami, Fl 33173
3) Change Add Remove		· .	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

(attach a	dditional sheets, if necessary,). (Be specific)
lf an am	endment provides for an exc	change, reclassification, or cancellation of issued shares,
provisio (if r	ons for implementing the am not applicable, indicate N/A)	endment if not contained in the amendment itself:
Irs. Miria	m Planas is surrendering	g her shares and will no longer have any shares pertaining
xpert	Cleaning Solution	ns, Inc.
nne E	ngle-Ochoa will be	the sole Shareholder with 100% of the Share
		<u>-</u>

The date of each amendment((s) adoption: Dec 16, 2011
Effective date if applicable:	Dec 16, 2011
 -	(no more than 90 days after amendment file date)
	,
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voining group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
_{Dated} Dec	. 16, 2011/
Signature	MW
	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 pointed fiduciary by that fiduciary)
αPI	ontice reducially by that reducially)
	Miriam Planas
	(Typed or printed name of person signing)
	President
	(Title of person signing)