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#### COYER LETTER

TO: Amondment Section Division of Corporations

# NAME OF CORPORATION: SHINE "R" US CLEANING CORP

## DOCUMENT NUMBER: P12000021681

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

Please return all correspondence concerning this matter to the following:

#### AMANDA VALENCIA

Name of Contact Person

Firm/ Company

## 18638 NE 18 AVENUE APT 242

Address

MIAMI, FLORIDA 33179

City/ State and Zip Code

### AVAGOM5@YAHOO.COM

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

For further information concerning this matter, please call:

#### AMANDA VALENCIA

Name of Contact Person

at (786) 260-4817 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

· · ·	Articles of Amendment	FILED
	to Articles of Incorporation	13 AUG 14 PM 3: 30
SHINE "R" US CLEANII	NG CORP	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Name of Corporation a	s currently filed with the Florida Dept. of St	ate)
P12000021681		
(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit Cor	poration adopts the following amendment(s)
4. If amonding name, enter the new n	ame of the corporation:	
word "chartered," "professional associa B. <u>Enter new principal office address</u> (Principal office address <u>MUST BE A S</u> C. <u>Enter new mailing address, if apol</u> (Mailing address <u>MAY BE A POST</u>	if applienble: <u>TREET ADDRESS</u> )	
new registered agent and/or the new	d/or registered office address in Florida, ent a registered office address: FELIX MARTINEZ	er the name of the
<u>Name of New Registered Agent</u>	300 NE 172 STREET	
	(Florida street address)	
	NORTH MIAMI	_, Florida 33167
<u>New Registered Office Address</u> :	(City)	_, Florida( <i>Zip Code</i> )
	hanging Registered Agent: ered agent. I am familiar with and accept the	ubligations of the position.

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• . If amending the Officars 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:

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<u>Xample:</u> X Change	<u>PT John I</u>	John Doe			
X Remove	V Mike Jones				
<u>X</u> Add	<u>SV Saily Smith</u>				
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	P	JOSE D. PAULINO	18638 NE 18 AVENUE APT 242		
Add X Remove			MIAMI, FL 33179		
2) X Change	Р	AMANDA VALENCIA	18638 NE 18 AVENUE APT 242		
Add			MIAMI, FL 33179		
<i>Remove</i> 3 ) Change Add	<u>v</u>	FELIX MARTINEZ	300 NE 172 ST N. MIAMI, FL 33167		
<ul> <li>4) Change</li> <li> Add</li> <li> Remove</li> </ul>	and an appropriate state				
5) Change Add Remove					
б) Change Add Removc					

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	<u>r adding additional ,</u> nal shects, if necessar	у). (Be specific,	)		
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	ent provides for an e	xchange, reclass	ification, or cancell	ation of issued share	<u>s</u>
<u>If an amendu</u>		mendment if pot	contained in the at	mendment itself:	
provisions fo	r implementing the a				
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		13 110 11 54		
The date of each amendment date this document was signed		13 AUG 14 PH 3: 30, if other than the		
-	07/22/2013	SECRETARY OF STATE TALLAHASSEE FLORIDA		
Effective date <u>if applicable</u> :		n 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.				
		through voting groups. The following statement to vote separately on the amendment(s):		
	; cast for the amendment(s) was/	were sufficient for approval		
by	(voling group)	,,* <sup>33</sup>		
	(voling group)			
The amendment(s) was/wer action was not required.	re adopted by the board of direct	ors without shareholder action and shareholder		
The amendment(s) was/wer action was not required.	re adopted by the incorporators v	without shareholder action and shareholder		
Dated_07	/22/2013			
Signuture _	7			
Signature				
AMANDA VALENCIA				
(Typed or printed name of person signing)				
(Litle of person signing)				