P12000032578

(Re	equestor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LJF CLEAN	VING & PAINTIN	NG INC	
	BER: P1200003257			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
		Name of Contact Person	1	
	LJF CLEANING	& PAINTING INC		
•		Firm/ Company		
	3815 TOWER RI	D 104		
		Address		
	TAMPA FL 3361	4		
•		City/ State and Zip Cod	e	
	E-mail address: (to be us	sed for future annual report	notification)	
		,		
For further information	concerning this matter, pleas	se call:		
ARAUJO, EL	IANE	at (813	, 770-7350	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address ment Section m of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation FILED

LJF CLEANING & PAINTING	INC	2012 ADD 20 P	M 1:51	
(Name of Corporation as currently	y filed with the Flo	with the second		-
P12000032578		SECRETARY OF STATE OF STATE OF STATE AHASSEE	FISTATE FLORIDA	
(Document Number	of Corporation (if l	(nown)		-
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this F	orida Profit Corporat	ion adopts the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or to	orp," "Inc," or "Co	o". A professional co		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A.				-
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u>)			-
				-
D. If amending the registered agent and/or registered agent and/or the new registered		s in Florida, enter the	e name of the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:	·		orida	
New Registered Office Address.	(City)	, FR	(Zip Code)	-
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		h and accept the oblig	ations of the position.	
Cionatura of	New Registered Age	ent if changing		
Signature of	Hen Negwieren Ag	eni, ij changing		

If amending the Officers and/or Directors, enter the title and	d name of each officer/director	r being removed and title, name, a	nd
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 <math>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:			
X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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) <u>x</u> Change Add Remove	P	ARAUJO, ELIANE	3815 TOWER RD 104 TAMPA FL 33614 US
2) X Change Add Remove	VP	GARCED, RICARDO	3815 TOWER RD 104 TAMPA FL 33614 US
3) Change Add Remove		<u> </u>	
4) Change Add Remove		-	
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if nece	ssary). (Be spec	ific)		
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		" "	· ·	
		·		
If an amandment provides for	an awahanga waal	anification or as	maallatiam afiamad	ah awa
If an amendment provides for a provisions for implementing the	ne amendment if	oot contained in t	he amendment itsel	<u>snares,</u> <u>f:</u>
(if not applicable, indicate	N/A)			_
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			· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: 04/06/2012			
Effective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):		
"The number of votes cas	t for the amendment(s) was/were sufficient for approval		
by	(voting group)		
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder		
Dated_04/06/	/2012		
Signature			
(By a selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)		
	ARAUJO, ELIANE		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		