P1200010045

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SECRETARY OF STATIONS ON PARTY OF THE COMPOSITATIONS OF THE COMPOS

Amund 10,13,13

COVER LETTER

TO: Amendment Section

Division of Corpo	orations				
NAME OF CORPOR	RATION: Global Faci	lity Services Inc.			
DOCUMENT NUME	BER: P1200010064	5			
	of Amendment and fee are sul				
Please return all corres	spondence concerning this mat	ter to the following:			
	Roman Manas				
		Name of Contact Person			
		Firm/ Company			
	3936 S Semoran	• •			
		Address			
	Orlando, FL, 3282	22			
		City/ State and Zip Code	:		
ron	nan.manas@gfsin	c.us			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Roman Mana	as	_{at (} 410	9613963		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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)		
	iling Address		Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
	. Box 6327	Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



Global Facility Services Inc.

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

P12000100645

ent(s) to

(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amerits Articles of Incorporation:	dme
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	atio
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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	
(Florida street address)	
New Registered Office 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.	
Signoture 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)

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.

X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	V Mike	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PTSD	Roman Manas	3936 S Semoran Blvd, Ste 436
Add			Orlando, FL, 32822
X Remove			
2) Change	VPD	C.J.Martinez	3936 S Semoran Blvd, Ste 436
Add			Orlando , FL, 32822
X Remove			
3) Change	0	Davron Saydahmedov	3936 S Semoran Blvd, Ste 436
X Add			Orlando, FL, 32822
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If-amend	ling or adding a	additional Artic	les, enter chan	ge(s) here:			
	dditional sheets,	, if necessary).	(Be specific)				
IA _.							
•							
			<u>.</u>	,			
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	•						
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						and shows	
II an am	ienament provi ons for implem	ides for an exch enting the ame	ange, reciassiii ndment if not c	ontained in th	e amendment	itself:	
(if	not applicable,	indicate N/A)					
				- · · - ·			
							
							
	····						
			·				
					· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption: 01/18/2013		
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 add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
Dated 01/18/	2013 A	
(By a diselecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Roman Manas	
	(Typed or printed name of person signing) President	
,	(Title of person signing)	