## Placolu43al

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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R. WHITE



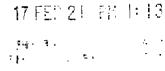
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	Master Coin Laune	dry Inc.	
DOCUMENT NUME			<del></del>
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Alfredo D Xiques		
•		Name of Contact Person	1
	Garica & Xiques PA		
•		Firm/ Company	
	2950 SW 27 Ave, Suite 100		
		Address	<del></del>
•	Miami, FL 33133		
		City/ State and Zip Code	<u> </u>
	F-mail address: (to be us	sed for future annual report	notification)
	12 man address, (to be di	sed for fatare annual report	notification)
For further information	concerning this matter, pleas	se call:	
Alfredo D Xiques		at (	358-4800
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 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		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Master Coin Laundry Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000104321 (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: 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) 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: (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)

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Kayla Marie Lima	111 NW 24 Ave
Add x Remove			Miami, FL 33125
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove  5) Change Add			
Remove 6) Change Add	<del></del>		
Remove			

Attach a	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
	•		
·	dment provides for an exchange, reclassification, or cancellation of issued shares,		
provisi	s for implementing the amendment if not contained in the amendment itself:  applicable, indicate N/A)		

The date of each amendment(s) date this document was signed.	doption:, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 40 days after amenament file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as topartment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were a by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s) afficient 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 ca	for the amendment(s) was/were sufficient for approval
by	"
, <u> </u>	(voting group)
The amendment(s) was/were a action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	opted by the incorporators without shareholder action and shareholder
February	6, 2017
Dated	
Signature	Matinis
selec	lirector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	Kayla Marie Lima
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)