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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: BERNAL CLEAR	NING AND SERVICES IN	VC
DOCUMENT NUM	IBER: P13000030444		
The enclosed Article	s of Amendment and fee are s	ubmitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
	CONSUELO BERNAL		
		Name of Contact Perso	on
	3340 THISTLEDOWN LAK	Firm/ Company	
	TAMPA, FL 34639	Address	
	E-mail address: (to be u	City/ State and Zip Coo O4 @ LTVP - Co sed for future annual repor	DM t notification)
For further informatio	n concerning this matter, plea	se call:	
CONSUELO BERNAL		at (813	619-0139
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
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)
Ame Divi: P.O.	ling Address ndment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

BERNAL CLEANING AND SERVICES INC.

(Name of Corporation a	is currently filed with the l	Florida Dept. of State)		
P13000030444		Dept. of Otale)		
(Document	Number of Corporation (if I	known)		
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Co	rporation adopts the follow	ving amendmen	t(s) to
A. If amending name, enter the new name of the corpor	ration:			
name must be distinguishable and contain the word "corner	, , , , , , , , , , , , , , , , , , ,		The new	
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	ration, company," or "inc "Co". A professional co. on "P.A."	corporated" or the abbrevia rporation name must cont	tion "Corp.," ain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES				
				
			020 AUG 11	
Enter new mailing address, if applicable:			100	:
(Mailing address MAY BE A POST OFFICE BOX)				i
			AFF :	-24
				
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 	flice address in Florida, en	ter the name of the		
agone and of the new registered office	address:			
Name of New Registered Agent			·	
	<u> </u>			
	lorida street address)		-	
New Registered Office Address:				
	(City)	(Zip	Code)	
ew Registered Agent's Signature, if changing Registered	d Agent:			
hereby accept the appointment as registered agent. I am fa	amiliar with and accept the	obligations of the position.		
Signature oj	f New Registered Agent, if c	hanging	_	
neck if applicable	= 3 775	-···-o''''6		
The amendment(s) is/are being filed pursuant to s. 607.012				

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 = ChiefExecutive 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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	NIKKI BERNAL	3340 THISTLEDOWN LAKE
XAdd			LAND O LAKES, FL 34639
Remove			
2) Change			
Add		,	
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	-		
Remove			
6) Change			
Add			
Remove			
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	dditional sh	ing additiona eets, if necesso	ary). (Be specific)		-				
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		ementing the		ent if not a	ation, or o	<u>cancellatior</u>	<u>1 of issued</u>	shares,		
(if no	t applicable	, indicate N/A	<u></u>	ent it fint Co	muameg ir	1 the amen	1ment itsel	<u>:1:</u>		
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08/11/2020 The date of each amendment(s) adoption: _____, if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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) 08/11/2020 Dated Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) CONSUELO BERNAL (Typed or printed name of person signing)

(Title of person signing)

VP