P13000031776

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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Spotless Building Corp. DOCUMENT NUMBER: P13000031776.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tyette Mainquist - Camejo Name of Contact Person Spotless Building Corp. Firm/Company 951 SE 127h Street Address Pompano Beach FL. 33060 City/State and Zip Code Maritzayza vierdo 28 Dicloud. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Trette Mainuist - Camer at (786) 380 - 2666 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

Spotless building	Corp.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P13000031776	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	(2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing duaress SIAT BE A FOST OFFICE BOX)	5.
	·.)
	80
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	and the state of t
Name of New Registered Agent Tycke M	annouist-('ameio
9<15<12	thelicot
(Florida stree	1 gddress)
Dan 0000	230100
New Registered Office Address: YOYY DOING	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position
Thereis accept the appointment as registered agent. Transfamilia wit	n and accept the obligations of the position.
Auto Wa	inguist.
Signature of New Reg	istered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and titlé, 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			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
Change	<u>V</u>	_ Tvete Mc	ainquist-C	amero OSISE 12ths	Troot
Add Rumava			O	Pompano Bear	<u>511.00</u> 2 <u>h 3</u> 3060
Remove				7	ı
2) Change					
Add					
Remove 3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
51 Change					
Add					<u></u>
Remove					
6) Change	-	_			
Add					
Remove					

*	cles, enter change(s) here: (Be specific)		
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an amendment provides for an each	ange, reclassification, or c	ancellation of issued shar	es,
an amendment provides for all exem	noment ii not containeu iii	the amenument risen.	
provisions for implementing the ame			
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Phe date of each amendment(s) adoption: _	9/1/2020	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(nomore than 90 days after amena	lment file date)
		•
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filir tof State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
(x). The amendment(s) was/were adopted by the action was not required.	the incorporators, or board of directors v	vithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	the shareholders. The number of votes of approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by must-be separately provided for each voti	the shareholders through voting groupsing group entitled to vote separately on	s. The following statement the amendment(s):
"The number of votes east for the an	mendment(s) was/were sufficient for ap	proval
by		"
(1	(voting group)	
Dated 9 1	2020	
Signature	· O Briefo	officers have not been
selected, by an ir	resident or other officer – if directors or incorporator – if in the hands of a receiv	er, trustee, or other court
appointed fiducia	iary by that fiduciary)	•
•	Celso Came	40
	(Typed or printed name of person signal	nng)
	PDT	
	(Title of person signing)	 _