## P13000089469

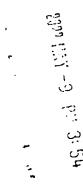
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## COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Mother & Daughter Cleaning Services Inc DOCUMENT NUMBER: P13000089469 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alice San Andres Name of Contact Person Firm/ Company 700 Lock Road, Apt 53 Address Deerfield, FL 334422 City/ State and Zip Code alicejescar@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 ) 305-9400
Area Code & Daytime Telephone Number Alice San Andres Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S52.50 Filing Fee ☐ \$43.75 Filing Fee & **□\$43.75** Filing Fee & \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

( <u>Name</u>	of Corporation as curre	ntly filed with the Flori	da Dept. of State)	
P13000089469				
	(Document Numbe	r of Corporation (if know	vn)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	,1006, Florida Statutes, th	ús Florida Profit Corpoi	ration adopts the followi	ng amendment(s)
A. If amending name, enter the new p	ame of the corporation:			
	1 10 10	" "	tra it il i i	Thenew
ame must be distinguishable and contain Inc.," or Co.," or the designation "( Chartered," "professional association,	Corp, " "Inc," or "Co".	A professional corpor	oratea or the appreviat. cation name must conta	in the word
3. Enter new principal office address, if applicable:		N/A		11. c686
Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			- : - \
				()
Enter new mailing address, if appl		N/A	,	ယ္
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )	-	<u></u>	<del></del>
Hamending the registered agent at new registered agent and/or the ne     Name of New Registered Agent			the name of the	
<u>Name of New Registerea Agent</u>				_
	(Florida	street address)		_
	N/A	sireer maaressr		
New Registered Office Address:		(City)	, Florida	Code)
		(Cily)	(2.1)	Concy
ew Registered Agent's Signature, if c	hanging Registered Age	nt:		
hereby accept the appointment as regist	terod agent. I am familia	r with and accept the ob	ligations of the position.	
<del></del>	Signature of New	Registered Agent, if cha	nging	
heck if applicable				
MEER II AUDIICAUIU				

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.

E <b>vample:</b> 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>	<u>Addres</u> s
1) Change			
Add			
Remove			983
2) Change		_	
Add			
Remove 3 ) Change			न
Add			. F
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
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	<u> </u>
	<u></u>
	•
	<del></del>
	ن <u>حسب</u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued	shares,
provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate N/A)	<u>lf:</u>
N/A	

<ul> <li>.</li> <li>The date of each amendment(s)</li> </ul>	adoption:	, if other than the
date this document was signed.	·	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wil	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided.	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	i.
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	- 1
by	(voting group)	÷ 9
		<u></u> -
4/30/202 Dated/ Signature	Cyclish	<u> </u>
(Aÿ Sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
(	Alice San Andres	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

..--