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JUL 10 2010 T. LEWIZIN



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: No Dripo Window Washing Inc.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person No Drips Window Washing Inc Firm/ Company 461 Merrinae Dr. Address Port Vrange FL 32127 City/ State and Zip Code JRMartinez 1985 Q guail-com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Jose R. Martinez at (321) 331-7698 Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Malling AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

A	1 1,1 /:
No Drips Wind	y filed with the Florida Dept. of State)
0.44	- > 4
<u> </u>	Corporation (if known)
(1Actument Number of	Corporation (It known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "word "chartered," "professional association," or the abbreviation "	o," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
	NI / L
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	1.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N /A
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	-
Name of New Registered AgentN	/A
The office he provided the second second	// \
(Florida str.	eel address)
1.17.00.00	
New Registered Office Address:	, Florida (Zin Code)
	resp ciency
	A C 20 11 11 11 11 11 11 11 11 11 11 11 11 11
New Registered Agent's Signature, if changing Registered Agent:	and the second s
I hereby accept the appointment as registered agent. I am familiar v	vith and accept the obligations of the position.
	THE TO ME
Signature of New R	egistered Agent, if changing
3	
	>

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>Joi</u>	hn Doe	
X Remove	<u>V</u> <u>M</u> :	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>.</u>	Joshua D. Williams	31 A Fangrowe Ln. Polm Coast FL 32127
<u></u> ∧dd			Palm Coast, FL 32/27
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6)Change			
Add			
Remove			

(Be specific)		
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ange, reclassification, or	cancellation of issued s	hares,
	- Alice	
ndment if not contained i	n the amendment itself:	
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ndment if not contained i	n the amendment itself:	
	cles, enter change(s) here (Be specific)	

he date of each amendment(s) adoption: July 3 2018	, if other than the
ate this document was signed.	
ffective date if applicable: (no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date output of the Department of State's records.	te will not be listed as the
doption of Amendment(s) (CHECK ONE)	
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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	ा
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required	
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 feceiver, trustee, or other cour appointed fiduciary by that fiduciary)	t
Tose R. Martinez (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	