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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SYLVIA CLEANI	NG SERVICE	ES, INC	
DOCUMENT NUME	ER: P14000014507	·		
	of Amendment and fee are su	bmitted for file	ing.	
Please return all corres	pondence concerning this ma	tter to the follo	owing:	
	SILVIA REEDY			•
		Name of C	ontact Person	n
	SYLVIA CLEANING SERV	/ICES, INC		
		Firm/ 0	 Company	
	416 4TH AVE SE			
		Ad	dress	
	RUSKIN, FL 33570			•
•		City/ State	and Zip Cod	c
yadira	a.nieves@epayroll-us.com			
<u>-</u>	E-mail address: (to be us		nnual report	notification)
For further information	concerning this matter, pleas	se call:		
SILVIA REEDY		at (813	270-5517
Name o		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the	Florida Depa	artment of State:
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified ((Additional enclosed)	Copy I copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SYLVIA CLEANING SERVICES, INC.

(Name of Corporation as currently f	filed with the Florida Dent. of State)
P14000014507	nea win the communication of
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this Fh its Articles of Incorporation:	orida 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," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	SECTIFIED A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	
New Registered Office Address:(C)	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with	h and accept the obligations of the position.
Signature of New Reg	istered 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: XChange	<u>PT</u>	John Do	<u>oe</u>			
X Remove	V	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally Si	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		Address	
1) Change	VP		ANGEL M CHANELO	_	416 4TH AVE SE	
Add					RUSKIN, FL 33570	
X Remove						
2) Change		_		-		
Add						
Remove						
3) Change		_		_		
Add				•		
Remove						
4) Change				-		
Add						
Remove						
5) Change		_		_		
Add						
Remove						
6) Change		_		-		
Add						
Remove						

	
	•
	
amendment provides for an exchange, reclassification, or cancellations for implementing the amendment if not contained in the ame	ion of issued shares,
(if not applicable, indicate N/A)	adment usen.
	•
	· · · · · · · · · · · · · · · · · · ·

	7/18/2018	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	8/2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	· • • •
	(no more man 20 tarys after tanerament fite date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.)
	proved by the shareholders through voting groups. The following statemer 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)	
-	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholde opted by the incorporators without shareholder action and shareholder	r
7/18/2018		
Dated		
/7		
Signature		
(B) a c	fireetor, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	SILVIA REEDY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	··