## PH OCOO MOLS

(F	Requestor's Name)	
(A	Address)	
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(0	City/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(E	Business Entity Nam	ne)
(0	Document Number)	
Certified Copies	Certificates	of Status
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## COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION:EURO SHINE C	LEANING INC.		
	BER: P14000017028			
	of Amendment and fee are so	abmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	ANNA BESENYEI			
		Name of Contact Perso	n	
	EURO SHINE CLEANING			
	<u> </u>	Firm/ Company		
	505 SPENCER DR. APT. 20	03		
		Address	<del></del>	
	WEST PALM BEACH, FL	33409		
		City/ State and Zip Cod	e	
AEU	ROSHINE@GMAIL.COM			į
		sed for future annual report	notification)	- <del>1</del> 9
	·		···-·,	- SE
For further informatio	n concerning this matter, pleas	se call:		23
ANNA BESENYEI		at (	324+1285	19 SEP 23 PHI2: 18
Name	of Contact Person	Area Co	de & Daytime Telephone Number	_ <u> </u>
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	හ සිරි න
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations Building	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Euro Shine	poration as curre	ntly fled with the Florida Dept. of State)		
P1400001-	1028			
	Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Its Articles of Incorporation:	Florida Statutes, th	is Florida Profit Corporation adopts the follow	ing amendme	nt(s) to
A. If amending name, enter the new name of	the corporation:			
EURO SHINE CONCIERGE, INC.			The new	
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp." "Inc." or	"Co". A professional corporation name mus	<u>ab</u> breviation	
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u> )		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>(E BOX</u> )	N/A	19 SEP 2	3 m
D. If amending the registered agent and/or renew registered agent and/or the new regis			3 PM12:	
Name of New Registered Agent N/A			_ <del>'s</del> }	
	(Florida s	street address)	_	
New Registered Office Address:		, Florida(City) (Zip.	Code)	
New Registered Agent's Signature, if changin	g Registered Agei gent. I am familian			

## 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: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	N/A	N/A	N/A
Add			
Remove			
2) Change	N/A	N/A	N/A
Add			
Remove	N/A	N/A	
3 ) Change			
Add Remove			
4) Change	N/A	N/A	N/A
Add			
Remove			
5) Change	N/A	N/A	N/A
Add			4 <del>7</del>
Remove			
6) Change	N/A	N/A	N/A
Add			
Remove			

E. <u>If amending or adding additional Art</u> (Attach additional sheets, if necessary).	icles, enter change(s	<u>s) here</u> :		
N/A	(De specific)			
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		<u> </u>		<del></del>
<u> </u>			<del></del>	<del></del>
•		_	<u> </u>	7.
		<del></del>	<del></del>	<del></del>
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	<del></del>			<del></del>
<ul> <li>If an amendment provides for an exch provisions for implementing the amer</li> </ul>	ange, reclassification	on, or cancellation ined in the amenda	of issued shares,	
(if not applicable, indicate N/A)	addicate in not conta	med in the amendi	nent usen.	
N/A				
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The date of each amendment( date this document was signed.	s) adoption:	, if other than the
*	09/18/2019	
Effective date if applicable:	0.5/16/2019	
_	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date very Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were 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):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	"	
· ——-	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
()9/18/ Dated	2019	
Signature	Allica Beserge: a director, president or other officer – if directors or officers have not been	
sele	a director, president or other office? – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	ANNA BESENYEI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>