P/40000038468

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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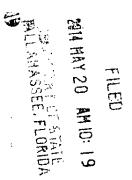
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05/28/14--01001--015 **35.00



Mr. Pando Wanted to change all the addresses to the Mendo address

10/4/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LAS NENAS CLEANING SERVICES CORPORATION				
DOCUMENT NUMBER: P14000028468				
OCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ISRAEL B. PANDO				
Name of Contact Person				
PANDO ACCOUNTING SERVICES				
Firm/ Company				
5800 WEST FLAGLER ST				
Address				
MIAMI, FLORIDA 33144				
City/ State and Zip Code				
PANDOISRAEL@YAHOO.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ISRAEL B. PANDO at (786) 282-8284				
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				

Mailing Address

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

Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy (Additional Copy

is enclosed)

actern

Articles of Amendment

Articles of Incorporation of

FILED

21 :01 MA 05 YAM 10: 19

LAS NENAS CLEANING SERVICES CORPOR

MALL AHAS (Name of Corporation as currently filed with the Florida Dept. of State) P14000028468

nt(s) to

A. If amending name, enter the new na	me of the corporation:		
			The
	ation "Corp," "Inc," or	tion," "company," or "incorporated" or "Co". A professional corporation name n "P.A."	
B. Enter new principal office address, if applicable:		151 SW 52 PLACE	.
(Principal office address <u>MUST BE A ST</u>		MIAMI, FL. 33134	
		-	
	C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
		MIAMI, FL. 33134	
		MIAMI, FL. 33134	
		Idress in Florida, enter the name of the	
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent		Idress in Florida, enter the name of the	
new registered agent and/or the new		Idress in Florida, enter the name of the	
	v registered office address	Idress in Florida, enter the name of the	
new registered agent and/or the new	v registered office address 151 SW 52 Plac (Florida	e street address)	

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	change address
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			151 SW 52 Place
Add			Miami, FL 33134
Remove			
2) Change			
Add Add			
Remove			
3) Change		.	
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
	
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an anger itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) ad	option:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
action was not required. The amendment(s) was/were ado	pted by the board of directors without shareholder action and shareholder	
action was not required.		
Dated	16/14/	
Signature	2 Aprilis	
	rector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	MARIA Ruiz	
	(Typed or printed name of person signing)	
	PAGSIDONT	
	(Title of person signing)	