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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Tempus Cleaning	and Staffing Inc		
DOCUMENT NUME	P14000051515			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Enrique Lizardo			
		Name of Contact Person	no	
	Tempus Cleaning and Staffing INc			
		Firm/ Company		
	3221 Pincapple Isle Drive			
		Address		
	Kissimmee, Florida, 34746			
		City/ State and Zip Co	de	
aligae	da@tamanaar aam			
enzan	do@tempuncs.com	sed for future annual repor		
	E-man address, (to be di	sed for future annual repor	t notification)	
For further information	n concerning this matter, pleas	se call:		
Enrique Lizardo		407 at (569-6225	
Name o	of Contact Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check fo	the following amount made	payable to the Florida Dep	partment of State:	
S35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314		Amer Divis Clifto	t Address adment Section ion of Corporations in Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Tempus Cleaning and Staffing Inc

(Name of Corporation	as currently filed with the Flori	da Dept. of State)	
(Documer	nt Number of Corporation (if know	m)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	statutes, this Florida Profit Corpor	ration adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corp	ooration:		
Tempus Cleaning Services Inc			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u></u>		
			- 23
		<u> </u>	19*
			¥0,
Enter new mailing address, if applicable:			2
(Mailing address MAY BE A POST OFFICE BOX)		·	· · · · · · · · · · · · · · · · · · ·
		*	<u> </u>
		-	
			<u>ယ</u>
D. If amending the registered agent and/or registered	d office address in Florida, enter	the name of the	
new registered agent and/or the new registered of			
Name of New Registered Agent			_
	(Florida street address)		
	,		
New Registered Office Address:	(City)	, Florida	Code)
	(City)	(21р	Coaej
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered agent. I d		ligations of the position.	
Signati	ure of New Registered Agent, if che	inging	_

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	PT	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			
2) Changa			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Remove			
5) Change		_	
Add			
Remove			
_ 			
6) Change			
Add			
Remove			

. <u>If amending or adding additional Article</u> (Attach additional sheets, if necessary).	(Be specific)	
	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	
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		···
 		··· · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	ı
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(y ma applicable, maleure (m.))		
		
	. .	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the an by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follows must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(roung group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required.	eholder
Nov. 05, 2019 Dated	
Signature	
(By a director president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Enrique Lizardo	
(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
President	
(Title of person signing)	•