# P14000056585

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C.V. Sept

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: JAY'S CUS	STOM CLEANIN	G SERVICE INC		
DOCUMENT NUM	BER: P1400005658	5			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	FANNY MORALE	ES			
	FANNY MORALES / DIVERSITY Insurance				
	TANTONALL	Firm/ Company	J-2nsolune		
	9770 BAYMEADOWS RD #131				
		Address			
	JACKSONVILLE	, FL 32256			
		City/ State and Zip Cod	e		
F۱	MORALES@DIVER	RSITYINSURE.N	NET		
<u>· · · · · · · · · · · · · · · · · · · </u>		sed for future annual report			
For further informati	on concerning this matter, pleas	se call:			
FANNY MORALES					
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State;		
\$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)		
Mailing Address Amendment Section			Address dment Section		
Di	vision of Corporations	Division of Corporations			
	D. Box 6327 Ilahassee, FL 32314	Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314  Tallahassee, FL 32301			_		

#### **Articles of Amendment** to Articles of Incorporation



### 15 MAR 24 PM 1: 28 JAY'S CUSTOM CLEANING SERVICE INC (Name of Corporation as currently filed with the Florida Dept. of State) P14000056585 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JAY STUCCO INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

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)	<u>Title</u>	Name	<u>Addres</u> s
(1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change	•		
Add Remove			
6) Change			
Add	,		
Remove			

NIA

. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
Attach additional sneets, if necessary).	(ре уресіне)			
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If an amendment provides for an eval	ange, reclassification, or cancellation of issued share	10		
nrovisions for implementing the amer	ndment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				
()				
	,			
	,			

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

The date of each amendment(s) ad	option: 03/17/2015	DIVISION OF C	ORPORALIÖNE	, if other than the
date this document was signed.		15 MAR 24	PM 1:28	
Effective date if applicable:				<del></del>
	(no more than 90 c	days after amendment fi	le date)	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado by the shareholders was/were sur		umber of votes cast for t	the amendment(s)	
The amendment(s) was/were app must be separately provided for				
"The number of votes east i	for the amendment(s) was/were	sufficient for approval		
by	(voting group)	.,,		
•	(voting group)			
The amendment(s) was/were ado action was not required.	pted by the board of directors w	rithout shareholder actio	n and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators withou	ut shareholder action and	d shareholder	
Dated_03/17/20	115			
Signatur	esis K	<u></u>		
(By a <b>Q</b> i	rector, president of other office			
	<ul> <li>by an incorporator if in the left in the</li></ul>	hands of a receiver, trust	tee, or other court	
	SESICA FERRERA			
		nted name of person sign	ning)	
	PRESIDENT			
	(Title	of person signing)		-