

P14000061674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

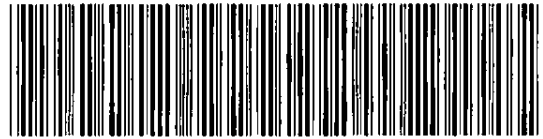
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800437774838

10/17/24--01002--003 **35.00

FILED
2024 DEC 16 AM 9:16
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PAYROLL SERVICE PROS, INC.

DOCUMENT NUMBER: P14000061674

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ESTRELLA M FERNANDEZ
Name of Contact Person
PAYROLL SERVICE PROS , INC
Firm/ Company
18489 N HIGHWAY 41 #2470
Address
LUTZ, FLORIDA 33548
City/ State and Zip Code
ESTRELLA@AJGPAYROLL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ESTRELLA M. FERNANDEZ at (813) 368-2772
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2024

ESTRELLA M FERNANDEZ
18489 N HIGHWAY 41 #2470
LUTZ, FL 33548

SUBJECT: PAYROLL SERVICE PROS, INC.
Ref. Number: P14000061674

We have received your document for PAYROLL SERVICE PROS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the Corporation on the Articles of Amendment does not match the document number.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 724A00024183

Articles of Amendment
to
Articles of Incorporation
of

PAYROLL Service PROS, INC.

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

P14000061674

(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:

● CLEAR PALM, INC

The new 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:

(City)

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

FILED
2024 DEC 16 AM 9:16
TALLAHASSEE, FLORIDA

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 V Mike Jones

X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) Change

 Add

 Remove

2) Change

 Add

 Remove

3) Change

 Add

 Remove

4) Change

 Add

 Remove

5) Change

 Add

 Remove

6) Change

 Add

 Remove

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

OCTOBER 26, 2024

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)"

OCTOBER 15, 2024
Dated _____

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ESTRELLA M. FERNANDEZ

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

FILED
2024 DEC 16 AM 9:16
TALLAHASSEE, FLORIDA

OCTOBER 14, 2024

To whom it may concern:

This is to let you know I have enclosed the Articles of Dissolution for:

Clear Palm, Inc.

Document number: P24000061280

As the Vice President (officer) we would like to keep this name and have enclosed

The Articles of Amendment for the existing corporation:

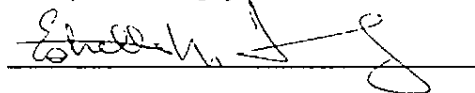
Payroll Services Pros, Inc.

Document number: P14000061674

To be changed to **Clear Palm, Inc.**

Appreciate your help in this matter.

Respectfully yours,

A handwritten signature in black ink, appearing to read 'Estrella M. Fernandez', is written over a horizontal line.

Estrella M. Fernandez

VP

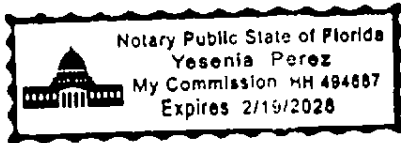
813-368-2772

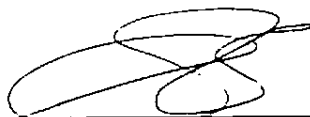
FLORIDA NOTARY ACKNOWLEDGEMENT (INDIVIDUAL)

STATE OF FLORIDA
COUNTY OF Hillsborough

The foregoing instrument was acknowledged before me by means of ☒ physical presence ☐ online notarization, this 14 day of October, 2024, by Yesenia Perez
(Name of Person Acknowledging).

(Seal)





Signature of Notary Public

Yesenia Perez

Print, Type or Stamp Name of Notary

Personally Known: _____
OR Produced Identification: ☒
Type of Identification Produced: ID

November 12, 2024

To whom it may concern:

This is to answer letter sent on November 4, 2024.

See attached.

I am the Vice President of both Corporations,

I wanted to change the name from **PAYROLL SERVICE PROS, INC.**

TO

CLEAR PALM, INC.

Instead, I made a new corporation by mistake., So sorry for the confusion.

That is why I requested the Articles of Dissolution for Clear Palm Inc which was

Filed on October 17, 2024.

Please I am requesting the release of the name **CLEAR PALM, INC** so I can use it for our **existing corporation,**

Payroll Service Pros, Inc.

Need the name changed from:

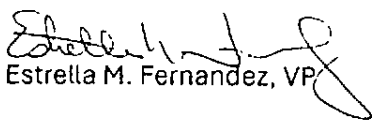
Payroll Service Pros, Inc.

Document #P14000061674

EIN #47-1529275

To: **CLEAR PALM, INC.**

Appreciate your help.


Estrella M. Fernandez, VP

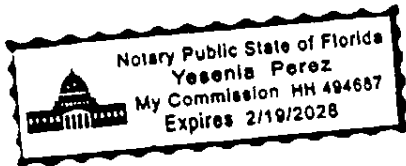
813-368-2772

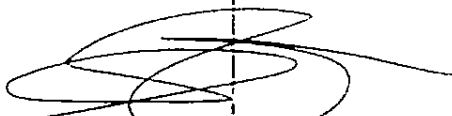
FLORIDA NOTARY ACKNOWLEDGEMENT (INDIVIDUAL)

STATE OF FLORIDA
COUNTY OF Hillsborough

The foregoing instrument was acknowledged before me by means of ☒ physical presence ☐ online notarization, this 12 day of November, 2024, by Yesenia Perez
(Name of Person Acknowledging).

(Seal)





Signature of Notary Public

Yesenia Perez

Print, Type or Stamp Name of Notary

Personally Known: ☒
OR Produced Identification:
Type of Identification Produced: