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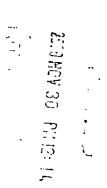
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W.J.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A & A'S CLEANE	RS INC	
DOCUMENT NUME	BER: P14000061986		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	GUTIERREZ, ALBERTO		
		Name of Contact Person	1
	A & A'S CLEANERS INC		
		Firm/ Company	
	3501 bessie coleman blvd #1		
		Address	
	TAMPA FL 33624		
	<u> </u>	City/ State and Zip Code	
	albert@aacleanersinc.com		
	E-mail address; (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
GUTIERREZ, ALBE	RTO	at (<u>813</u>	7488806
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Division The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

Λ	æ.	214	CI	17.5	NE	2.9	INC

A & A & CEEANERS INC					
(Name o	of Corporation as currently	filed with the Florida Dept. of State)			
P14000061986					
	(Document Number of	Corporation (if known)	•		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the following	ig amendmer	u(s)	
A. If amending name, enter the new_n:	ame of the corporation:				
A&A'S COMPLETE JANITORIAL INC			_The new		
	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviati professional corporation name must contai	on "Corp.,"		
B. Enter new principal office address,	if annlicable:	3501 Bessie Coleman Blvd. Suite# 25281			
(Principal office address MUST BE A S		Tampa, Fl. 33622			
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		4828 Et. Capistrano Dr.			
	,	Tampa, Fl. 33634			
			<u> </u>		
			<u></u> [
D. If amending the registered agent ar			ا س		
new registered agent and/or the new	<u>w registered office address:</u>		7.4	•	
Name of New Registered Agent	NA		-· 원	-	
	NA		<i>5.</i>		
	(Florida stre	ret address)	_		
New Registered Office Address;	NA	. Florida ^{NA}			
New Registered Office studiess,			Code)		
			•		
New Registered Agent's Signature, if c	hanging Registered Agent:				
I hereby accept the appointment as regist	ered agent. – Lam familiar w	ith and accept the obligations of the position.			
			•		
	Signature of New Re	egistered Agent, if changing	-		
	•				
Check if applicable					

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

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)

Example:

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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		NA	
Add			
Remove			•
2) Change		NA NA	
Add			
Remove 3) Change		NA	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		NA	
Add			·
Remove			
6) Change	<u>.</u>	NA	
Add			
Remove			•

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
A	
	
	_
	
	
	
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)	
Α	•
	_
	· · · · · · · · · · · · · · · · · · ·
	•

	11/24/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		•
	5/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	ino more man 90 aays ajier amenameni jue daici	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action and	I shareholder
■ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	•
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
Alberto S. Gutierrez		
by	(voting group)	
11/24/202	0	
Dated		
Signature	111 Z	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	Alberto S. Gutierrez	
	(Typed or printed name of person signing)	•
	PRESIDENT	
	(Title of person signing)	