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DJ MOBILE WASH, CORP

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COVER LETTER

TO: Amendment Section Division of Corporations

Page: 2 of 6

NAME OF CORPO	RATION: DJ MOBILE WASI	H, CORP			
DOCUMENT NUMI	BER: P14000076998				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	GILVAM F DOS SANTOS				
		Name of Contact Person			
	GFS TAX & ACCOUNTING SERVICES				
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	<u> </u>	Address			
	CORAL SPRINGS FL 33065				
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For further informatio	n concerning this matter, pleas	e call:			
GILVAM F DOS SANTOS		954 at (9573244		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	urtment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
	endment Section	Amendment Section			
	ision of Corporations	Division of Corporations The Centre of Tallahassee			
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					
i dii	unuovee, i ii jiji ta		ssee, FL 32303		

Articles of Amendment Articles of Incorporation of

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ì	Page: 3 of 6	2021-12-09 20:32:1	5 GMT	19542524650	From: Juliana do
				H91000A	496863
		Articles of A	mendment		
		to Articles of Inc.	orporation		5
(MODUE IV)	ACIT CORD	of	·		P.1.12.21
J MOBILE WA		Corporation as currently	v filed with the F	orida Dent. of State)	
14000076998	<u>(2-11,000 %)</u>		, man	VIEW SAME KINGHE	2/
		(Document Number of	f Corporation (if k	nown)	
rsuant to the pr Articles of Inc		006, Florida Statutes, this I	Florida Profit Cor	poration adopts the foll	owing amendment(s) to
. <u>If amending</u>	name, enter the new nan	ne of the corporation:			
	· · · · · · · · · · · · · · · · · · ·			·	The new
nc.," or Co.,"	or the designation "Co.	he word "corporation," "c rp," "Inc," or "Co". A ir the abbreviation "P.A."			
Enter new pr	Enter new principal office address, if applicable:		442 SW SANS	ON LANE	
Principal office address MUST BE A STREET ADDRESS)	REET ADDRESS)	PORT SAINT	LUCIE, FL 34953		
	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		442 SW SANS	ON LANE	
			PORT SAINT L	UCIE, FL 34953	
. If amending new registers	the registered agent and ed agent and/or the new	or registered office addr registered office address:	ess in Florida, en	ter the name of the	
new registere	ed agent and/or the new	or registered office address;			
new registere	ed agent and/or the new	registered office address:	.		
<u>new registere</u> <u>Name of</u>	ed agent and/or the new	registered office address: (Florida stre	zei address)		

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

E382P4400016H

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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:

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DТ

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	PT	John Do	<u>×</u>	
X Remove	¥	Mike Jo	enes	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				<u> </u>
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_	**************************************	
Add				
Remove				

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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	
F. If an amendment provides for an exchange, reclassification, or cancella provisions for implementing the amendment if not contained in the an (if not applicable, indicate N/A) N/A	tion of issued shares, tendment itself:
	
·	

Page: 6 of 6

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The date of each amendment(s) a late this document was signed.	doption:	if other than
Effective date <u>if applicable</u> :	() () () () () () () () () ()	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this focument's effective date on the D	block does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholde	r action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amenda ufficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s).	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	79	
	(voting group)	
	ER 22, 2021	
DatedSignature	sting chalf wirnit enoug	
	Arector, president or other officer - if cirectors or officer have not led, by an incorporator - if in the hands of a receiver, trustee, or other	
	und fiduciary by that fiduciary)	
	MENDES ALMEIDA, DEONE V	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	· ·