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15 NOV -9 & 1111: 10

COVÉR LETTER

**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: AMERICAN CLE	AN TEAM INC	
DOCUMENT NUMBE	P15000004243		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
IV	'AN MARTINS		
	·	Name of Contact Person	1
Al	MERICAN CLEAN TEAM	1 INC	•
_		Firm/ Company	
11	0 PRESTON "C"		
_		Address	
В	OCA RATON FL 33434		
		City/ State and Zip Code	e
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
IVAN MARTINS		at (⁵⁶¹	235-1880
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for the	ne 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division	Address Iment Section on of Corporations Building

Articles of Amendment to Articles of Incorporation of

AMERICAN CLEAN TEAM INC

15 MOV -9 AHII: 10

(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P15000004243	TALLATAS LE TELETA
(Docum	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	corporation:
	The new
	ord "corporation," "company," or "incorporated" or the abbreviation or," "Inc," or "Co". A professional corporation name must contain the eabbreviation "P.A."
B. Enter new principal office address, if applicabl	le:
(Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
	
	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	d office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
The Registered System Maries.	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent: I am familiar with and accept the obligations of the position.
t nervoy accept the appointment as registered agent.	i am jammar with and accept the obligations of the position.
Sign	nature 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.

Example: 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>	<u>Nam</u>	<u>e</u>		<u>Addres</u> s
1) Change	VP	BRU	JNA FREIRE		4638 SW 12 CT
X Add					DEERFIELD BEACH FL 33442
Remove					
2) Change					
Add				_	
Remove					
3) Change		<u></u>			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add				· -	
Remove					
6) Change					
Add				-	
Pamova				•	

(Attach additional	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself: Stable, indicate N/A)
•	A FREIRE WILL ALSO REDISTRIBUTE THE 1000 SHARES OF THE CORPORATION ON
QUAL AMOUNTS	FOR PRESIDENT AND VICE-PRESIDENT. 500 SHARES FOR EACH SHAREHOLDER.

JULY 1 2015	ie ali an ali an alia
The date of each amendment(s) adoption:	, if other than the
date this document was signed. JULY 1, 2015	
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, the document's effective date on the Department of State's records.	nis 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 amendment by the shareholders was/were sufficient for approval.	nent(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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"	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated	
Signature	<u></u>
(By a director, president or other officer – it directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	been r court
IVAN MARTINS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	