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C. GOLDEN APR 2 0 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Spotless D	oot & Exterior	· Cleaning	
DOCUMENT NUMB	ER: <u>PIS00603798</u>	34	, 	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	SZ1 Belvar	Address U 33.937		
E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, pleas	se call:		
		at (<u>407</u>	, 235- 64th	
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check 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)	
Ame Divi P.O.	ting Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassec, FL 32303

Articles of Amendment

to
Articles of Incorporation

	Articles 01 ft				
Southers Rook S	l Exterior	Cleaning	Inc.	2020 / 20 - 6	All O. A
(Name of Corpor	ation as curren	tly filed with the I		State)	<u> 60 0. 2</u>
Q15000032884					
(Doc	cument Number	of Corporation (if I	known)		
Pursuant to the provisions of section 607,1006, Florits Articles of Incorporation:	rida Statutes, this	Florida Profit Co	prporation adopt	s the following ame	ndment(s) to
A. If amending name, enter the new name of the	corporation:				
				The	new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "Ir "chartered," "professional association." or the abo	ic," or "Co".	A professional co	corporated" or t proration name	he abbreviation "Co	orp"
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					
		<u> </u>			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	B <i>OX</i>)	<i>,</i> .	.		_
		i			
		··· ·			
D. If amending the registered agent and/or registered new registered agent and/or the new registered	tered office add ed office addres	l <u>ress in Florida, e</u> s:	nter the name o	<u>f the</u>	
Name of New Registered Agent					
	/FI : I				
	(Pioriaa si	reet address)			
New Registered Office Address:		(City)	, Flo	orida	
		(Cit)		(Zip Coae)	
New Registered Agent's Signature, if changing R	egistered Agen	<u>t:</u>			
I hereby accept the appointment as registered agent	. I am familiar	with and accept th	e obligations of	the position.	
	 -				
Sig	gnature of New I	Registered Agent, ij	Changing		
Check if applicable					

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)

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>	<u>Name</u>	Address
1) Change	70	Grace Betancourt	527 Belyar Dr
Add			Davenport PL 33837
X Remove			
2) Change			
Add			·
Remove Change		<u> </u>	
Add			
Remove		·	
4) Change			
Add			
Remove			
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			<u></u>
Remove			
6) Change			
Add			
Remove			

	neets, if necessary). (Be	specific)	•		
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an amendment pr	ovides for an exchange,	reclassification, or	cancellation of iss	ued shares,	
(if not applicab	lementing the amendme le, indicate N/A)	nt ii not contained	in the amendment	itseii:	
	·				
					
	NA				
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: 3/30/2020 (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.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ient(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):	itement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
Dated	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Signal Rivera Rivera (Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
(Typed or printed name of person signing)	
<u>Viesident</u>	
(Title of person signing)	