Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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From:		orporations : (850)617-6	5380			
From:	Fax Number	: (850)617-6	5380			
From:	Account Name					
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	Account mulle	: SORSHER &	ASSOCIATES,	LLC.		
	Phone Phone	r : I201700006 : (954)842-2				
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SEP 1 5 2020

TO: Amendment Section

COVER LETTER

Division of Corp	orations			
NAME OF CORPOR	RATION: CLEANWEL INC	C		
DOCUMENT NUMI				
	of Amendment and tre are si			
	pondence concerning this me	_		
	GELASHVILI, SALOME			
	CLEANWEL INC	Name of Contact Perso	n	
,	 .	Firm/ Company		
	1755 E HALLANDALE BE			
	- · · · · · · · · · · · · · · · · · · ·	Address		
	HALLANDALE, FL 33009			
		City/ State and Zip Coc	le	
	cleanwelcorp@yahoo.com			
-		sed for future annual report	notitication)	
	(in this amount topon	. inclineation)	
For further information	concerning this matter, pleas	se call:		
GELASHVILI, SALO	ME	786	, 564-9878	
Name o	Contact Person	Area Co	de & Daytime Telephone Number	
linclosed is a check for	the following amount made			
S35 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 Taliahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

CLEANWELINC	
(Name of Corporation as currently filed with the Florida Dept. of Scate) P15000078123	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the follows: Articles of Incorporation:	wing amendment(s) to
. If amouding name, enter the new name of the corporation:	
ume must he distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious, "or Co.," or the designation "Corp," "inc," or "Co". A professional corporation name must conchartered," "professional association," or the abbreviation "P.A."	The new ation "Carp.," lain the word
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	
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:	433 0.02
Name of New Registered Agent	
•	> : ' i
(Floridu street address)	- <u>-</u> ・
New Registered Office Address: Florida	_
W 1	Code)
ew Registered Agent's Signature, if changing Registered Agent: searchy accept the appointment as registered agent. I am familiar with and accept the obligations of the position	
Signature of New Rogistered 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 (Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

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 monner. 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 30</u>	<u>ohn Doe</u>	
X Remove	<u>v</u> <u>v</u>	like Jones	
<u>X</u> Add	<u>sy</u> <u>s</u> :	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addrus</u> s
l) Change	Ч <u>∨</u>	NINO ARMSTRONG	1755 E HALLANDALE BEACH BLVD 1108
X Add			HALLANDALE, FL 33009
Remove			
2) Change	<u> </u>	GOCHA GELASHVILI	1755 E HALLANDALE BEACH BLVD 1108
X Add			HALLANDALE, F1. 33009
Remove 3) Change			
Add			
Remove			
4) Change			
Vqq			
Remove			
5) Change			
Add			
Remove			
б) Change			
. <u> —</u> Уда			
Remove			

<u>Camending or adding ac</u> Attach <i>additional sheets,</i> i	if nacessary).	(Be specific)					
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an amendment provide:	s for an excha	nge, reclassific	ation, or cane	ellation of issu	ed shares.		
rovisions for implement (if not applicable, indi	ting the amen-	dment if not co	ontained in the	<u>amendment i</u>	tself:		
7,							
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 no document's effective date on the Department of State's records.	ot be listed as the
Adaption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action and shareholder action was not required.	areholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
1 The amendment(s) was/were approved by the shareholders through voting groups. The following statement anist be separately provided for each voting group entitled to vote separately on the amendment(s):	
The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
09/11/2020 Dated	
Signature Salome Gelashvili	
(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)	
GELASHVILI, SALOME	
(Typed or printed name of person signing)	·
PRESIDENT	
(Title of person signing)	- -