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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO)N:	PEOS CLEANIN	NG CORP		
DOCUMENT NUMBER: _		P1500007943	33		
The enclosed Articles of Am	endment and fee are su	bmitted for filing	<u>.</u>		
Please return all corresponde	nce concerning this ma	tter to the follow	ing:		
		SERGIO PENA	OLGUIN		
		Name of Con	tact Persor		
		PEOS CLEAN	ING COR	P	
		Firm/ Co	mpany		
		1229 SEDEEVA	A CIRCLE	N	
		Addr	ess		
		CLEARWATER	. FL 33755		
		City/ State an	d Zip Code	:	
•	iı	nfo@bnmultiserv	ices.com		
	-mail address: (to be us	-		notification)	
For further information conc SERGIO PEN	-	se call:	727	373-8522	
Name of Contact Person		u. (Area Coo	le & Daytime Telephone Number	
Enclosed is a check for the fo	ollowing amount made	payable to the Flo	orida Depa	rtment of State:	
S35 Filing Fee	IS43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Co (Additional c enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A				Address	
Amendmer	nt Section Corporations	Amendment Section			
P.O. Box 6	•	Division of Corporations Clifton Building			
Tallahasse			xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

PEOS CLEANING CORP

(Name of Corp	poration as currently filed with the Florida	Defrigi State) 5 12: 211
	P15000079433	and the second of the second of
([Document Number of Corporation (if known)	TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:		
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	'Corp," "Inc," or "Co". A professional co	corporated" or the abbreviation or
3. Enter new principal office address, if appli		
Principal office address <u>MUST BE A STREET</u>	··	
Enter new mailing address, if applicable:		•
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>	
		·
	,	
O. If amounting the product of a control of		
 If amending the registered agent and/or re new registered agent and/or the new regist 		e name of the
Name of New Registered Agent		
	(Florida street address) .	
New Registered Office Address:		171 * 1
New Registerea Office Adarcss.	(City)	, Florida(Zip Code)
		·
New Registered Agent's Signature, if changing		
hereby accept the appointment as registered ag	gent. I am Jamiliar with and accept the oblig	ations of the position.
	Signature of New Registered Agent if change	nina

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 Smi	<u>th</u>		
Type of Action (Check One)	Title	<u>]</u>	<u>Name</u>	Address	
1) Change	V	,	ANTONIA PEREZ HERNANDEZ	1229 SEDEEVA CIR N	
X Add				CLEARWATER, FL 33755	
Remove				· 	
2) Change					
Add			·		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add		_ _			
Remove					
δ Chan-					
δ) Change		- -	·		
Add					
Remove					

	g additional Artiets, if necessary).	(Be specific)			
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				-	
f an amendment pro provisions for imple	vides for an exch	ange, reclassifica	tion, or cancellatio	on of issued shares.	•
(if not applicable	incircing the amer	nament it not cor	itamed in the amer	ioment usen:	
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•	07/10/2019	
The date of each amendment(s) add this document was signed.	option:	, if other than the
Effect 1. 1.	07/10/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cas	st for the amendment(s)
	roved by the shareholders through voting groups. each voting group entitled to vote separately on th	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	
·	(voting group)	- -
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action	on and shareholder
07/10/20	9	
Dated		· —
Signature	rector, president or other officer - if directors or o	fünge have not have
selecte	I. by an incorporator – if in the hands of a receiver ed fiduciary by that fiduciary)	
	SERGIO PENA OLGUIN	N
	(Typed or printed name of person signi	ng)
	PRESIDENT	
	(Title of person signing)	