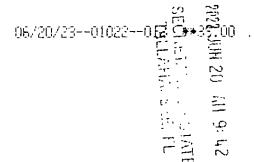
P15000091361

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800410819208



M

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: P150000<u>913</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ocselle R. Knight

Name of Contact Person

Oh la la Spotless, Inc.

Pirm/ Company 7855 NW 29th st, ste 190 Miami, PL 33122
City/State and Zip Code Custom Ercare & ohlalas potless . com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name of Corpo	oration as currently filed with the Flori	ida Dept. of State)	
PIS	000091361		
	ocument Number of Corporation (if know	wn)	
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	orida Statutes, this Florida Profit Corpo	ration adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the	he corporation:		
			The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," " "chartered." "professional association," or the a	'Inc." or "Co". A professional corpo	porated" or the abbrevia ration name must cont	tion "Corp.,"
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET	able: ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)		
D. If amending the registered agent and/or reg new registered agent and/or the new register Name of New Registered Agent	gistered office address in Florida, enter ered office address:	r the name of the	SCUNETANT OF LO
			A
	(Florida street address)		—54 · · · ·
New Registered Office Address:	(City)	, Florida(Zi _t	p Code F
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: Onto I am familiar with and accept the ob-	bligations of the position	, III
Thereby accept the appointment as registered age	, , , , , , , , , , , , , , , , , , ,		
	Signature of New Registered Agent, if cha	anging	
	5.5		
Check if applicable			

 \Box 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.

Example: <u>X</u> 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>	<u>Addres</u> s
1) Change	_5_	<u>Coria Rodriguez</u>	7855 NW 29th 1, ste 190 Miami, PL 33122
Add		,	Miami, PL 33122
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			SECRE
5) Change			SECRELL.
Add			• •
Remove			
6) Change			= 1 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 2 1
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
(mass and some some some some some some some some	
	<u> </u>
·	
	လ ဥ
Notice of Second showing	SECRETAR TALLAHA
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	SEORETAK TALLAHA
(y not appreciate, mandate root)	五字
	<u>'</u>
	严罰
	•
	<u> </u>
	_

The date of each amendment(s) a	doption:	, if other than the
late this document was signed.	n4/15/2023	
Effective date <u>if applicable</u> :	04/15/2023 (no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requireme epartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the a ufficient for approval.	mendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amendm	ring statement ent(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated	9.By	
Signature	9 Bel	
(By a select	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, onted fiduciary by that fiduciary) (Typed or printed name of person signing)	r other court
	CAO-President.	' ₁₂ , <u>→</u> - Z
	(Title of person signing)	
		20 M 9: 42 RE OF STATE HASSEE, FL
		TE 2