P15000101269

(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:





200295108702

02/06/17--01052--023 **35.00

SECRETARY OF STATE

FEB 0 9 2016 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Elife Cleaning Jolutions, Inc. DOCUMENT NUMBER: P15000101269
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
anthony Barrientos
Elite Cleaning Soutions, Inc
1825 Firm/ Company 49 Street
Wellington Address 33024
City/ State and Zip Code ant barrientos @ g mail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

to

Articles of incorporation	
Elite Cleaning Solutions, Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
7 15000101269	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ving amendment(s) to
A. If amending name, enter the new name of the corporation:	
Na	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name musword "chartered," "professional association," or the abbreviation "P.A."	abbreviation est contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Crincipul Office dadress MOST BL ASTREET ADDRESS)	<u> </u>
	<u>.</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Wellington, M. 33	aee 414
D. <u>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:</u>	
Name of New Registered Agent \\ \(\mathcal{N} \)	
(Florida street address)	
New Registered Office Address:, Florida	
	Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of the position	n.
TAHAS	
Signature of New Registered Agent, if changing	
A IQ 00 FLORIDA	

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:	, unu bu	ing isman, is and is an indu.	
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) 1) Change	Title	Shela Vega Diaz	1065 Mulberry Place
AddRemove		<u> </u>	Wellington, F1 33414
2) Change			
Add Remove			
3) Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change	- · · · · · · · · · · · · · · · · · · ·		
Add			
Remove			
6) Change Add			
Remove			

Attach additional sheel	additional Articles s, if necessary). (B	le specific)			
	na				
	-11/9				
· · ·					
					
	 .		· · · · · · · · · · · · · · · · · · ·		
					
f an amendment prov	vides for an avahana	ro modernificatio	- o- ollotia	n of issued share	
provisions for impler	nenting the amenda	e, reclassification	ned in the amen	dment itself:	<u> </u>
(if not applicable,	indicate N/A)				
	n/0				
	- 1 6				
					
					
					
		-			

The date of each amendment(s) adoption:	Nla		, if other than the
date this document was signed.	v 10	`	
Effective,date if applicable: (no n	more than 90 days after an	mendment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State's		filing requirements, this date wil	l not be listed as the
Adoption of Amendment(s) (CHECK	ONE)		
The amendment(s) was/were adopted by the shareh- by the shareholders was/were sufficient for approve		ites cast for the amendment(s)	
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group			
"The number of votes cast for the amendment	t(s) was/were sufficient for	r approval	
by(voting gro		·*·	
(voung gre	оир)		
The amendment(s) was/were adopted by the board action was not required.	of directors without sharel	holder action and shareholder	
The amendment(s) was/were adopted by the incorpaction was not required.		er action and shareholder	
Dated 2-3-20	17		
Signature Onthous	Barrian	Sol	
(By a director, presiden ⊭o		ors or officers have not been	_
selected, by an incorporate appointed fiduciary by that		eceiver, trustee, or other court	
	anthony	Barrientos	
(Typed	or printed name of person	n signing)	
	Krosidon	J	
	(Title of person signi	ing)	