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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: TIMELINE BUSINESS CENTER LLC Account Name

Account Number : 120150000034 Phone : (239)344-7417

Fax Number

: (888)344-7262

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email Address: | E١ | na | i | 1 | | A | þ | d | r | e | \$ | 5 | ; | _ |
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AUG 0 6 2018

Electronic Filing Menu

Corporate Filing Menu

| | Articles of Amendment | • | • | |
|---|--|---|--------------|---------------------------------------|
| | to Articles of Incorporation | ٠. | • | |
| | of | | | |
| | . HAIL TO THE CLEAN CO | э | | |
| (Name of C | orporation as currently filed with | the Florida Dep | t, of State) | |
| | P16000010764 | | | |
| | (Document Number of Corporation | n (if known) | | |
| | | | | |
| Pursuant to the provisions of section 607.100 | 6. Florida Statutes, this Florida Pro | fit Corporation a | dopts the fo | llowing amendmen |
| its Articles of Incorporation: | | | | |
| A. If amending name, enter the new name | of the corporation: | | | |
| SIMPLY CLEAN BY JES INC | | ٠. | | The new |
| to distinguishable and contain | the word "corporation," "compa | iny," or "incorp | orated or | the abbreviation |
| "Corn " "Inc " or Co." or the designation | on "Corp," "Inc." or "Co": A pro | ofessional corpor | ation nume | nust contain the |
| word "chartered," "professional association | i," or the abbreviation "P.A." | • | | ~ _ |
| B. Enter new principal office address, if a | opticable: | | <u>.</u> | E |
| (Principal office address MUST BE A STRI | EET ADDRESS) | | • | |
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| | | ··· | | . <u>γ</u> |
| | | • | | |
| C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF | <u>ile:</u> FICE ROY) | | • • | |
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| D. If amending the registered agent and/o | or registered office address in Flor | rida, enter the na | me of the | |
| D. If amending the registered agent and/o new registered agent and/or the new r | or registered office address in Flor egistered office address: | rida, enter the na | ime of the | |
| D. If amending the registered agent and/or new registered agent and/or the new r | or registered office address in Flor egistered office address: | ida, enter the na | nne of the | · · · · · · · · · · · · · · · · · · · |
| new registered agent and/or the new r | or registered office address in Flor egistered office address: | rida, enter the na | ame of the | |
| new registered agent and/or the new r | or registered office address in Flor egistered office address: (Florida sweet address) | | ame of the | |
| Name of New Registered Agent | egistèred office address: | | | |
| new registered agent and/or the new r | egistèred office address: | | ame of the | (Zip Code) |
| Name of New Registered Agent | egistèred office address: (Florida savet address) | | | (Zip Code) |
| Name of New Registered Agent | egistèred office address: (Florida savet address) | | | (Zip Code) |
| Name of New Registered Agent Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if that | (City) | | Florida_ | |
| Name of New Registered Agent | (City) | | Florida_ | |
| Name of New Registered Agent | (City) | | Florida_ | |
| Name of New Registered Agent | (City) | | Florida_ | |

| address of each Officer (Attach additional sheets Please note the officer/di P = President: V = Vice Executive Officer; CFO, held. President, Treasure Changes should be noted a change, Mike Jones lee Mike Jones, V as Remove | and/or Di , if necesso irector title President, = Chief F er, Directo I in the fol aves the co | iry) by the first letter of the office title: T - Treasurer: S= Secretary: D= Director: TR= Trustee: C = Chairman or Clerk: CEO = Ch inancial Officer. If an officer/director holds more than one title, list the first letter of each off r would be PTD. lowing manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There orporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Chan |
|---|--|--|
| Example: X Change | PT . | John Doc |
| X Remove | <u>v</u> | Mike Jones |
| . <u>X</u> Add | <u>sv</u> · . | Sally Smith |
| Type of Action (Check One) | Title | Name Address |
| 1)Change | | |
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| Attach additional sheets, if neces | | | • | - | , |
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| If an amendment provides for provisions for implementing (if not applicable, indicate | the amendment if no | sification, or can of contained in th | ellation of issues e amendment itse | i shares. lf: | |
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|---------------------------------------|---|---|------------------------|--|--------------|---|
| The date of each amendment | | | | | , | _ if other than |
| late this document was signed | • | | | ٠. | | |
| ·. · | 08/02/2018 | | • | • | | . : |
| Effective date <u>if applicable</u> : | · | o more than 90 days | dian any and areas | lile date | · . | |
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| document's effective date on t | ne Department of Sur | e s recurus. | | | , , | |
| Adoption of Amendment(s) | CHEC | K ONE) | , | | , | • • • • |
| | 1 | , , , | | | | |
| ☐ The amendment(s) was/we | re adopted by the shar | cholders. The number | her of votes cast for | r the amendme | nt(s) | |
| by the shareholders was/w | ere sufficient for appr | oval. | | | | |
| | | | | | | |
| ☐ The amendment(s) was/we | re approved by the sh | archolders through 1 | oting groups. The | following stat | zment . | |
| must be separately provid | ed for each voting gro | oup entitled to vote s | eparately on the a | mendment(\$): | · | |
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| The number of vote | s cast for the amendm | eni(s) was/were suit | neight for approvar | | | |
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| The amendment(s) was/we | ere adonted by the bos | ad of directors with | om shareholder act | ion and shareh | older | |
| action was not required. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | • * | • |
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| action was not required. | | . , , , | | | • • • | • • • |
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| 154100 | | | . | * . • | | |
| , | 16. Oal 3 | | ^ | | • | |
| Signature | By a director, preside | u or other officer | if directors or office | ers have not h | | — . · |
| ; | elected, by an incorporate | nt or other office. — | ds at a receiver, tr | ustee, or other | court . | • |
| | appointed fiduciary by | | | | | |
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| | (Ту | pod or printed name | or berson signing | , | | |
| | PRESIDENT | | ٠,. | | • • • | • |
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