PN000 21972

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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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05/23/16--01024--025 **10.00

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2016 HAY 20 PM 8: 14

MAY 2.3 2016 C. CARRO (HERS



May 9, 2016

STACY ANN COWARD 4625 NW 9TH DR PLANTATION, FL 33317

SUBJECT: REFRESH HOME CLEANING INC

Ref. Number: P16000021972

We have received your document for REFRESH HOME CLEANING INC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document.

THE FORM YOU SUBMITTED IS USED FOR A LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 516A00009685

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: Refresh howe Cleaning In						
DOCUMENT NUMBET						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Stacy-Ann Coward Name of Contact Person Refresh Nome (Learning Inc Firm/Company Ab25 NW, 9th Dr. Address City/ State and Zip Code Yawai 876 D gmail. Lom E-mail address: (to be used for fluvire annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person at (154) 152 - 7713 Area Code & Daytime Telephone Number						
r						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing Address Street Address						

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> its Articles of Incorporation:	adopts the following amendment(s)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> its Articles of Incorporation:	adopts the following amendment(s)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> its Articles of Incorporation:	adopts the following amendment(s)
its Articles of Incorporation:	adopts the following amendment(s)
A TO U	
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incor	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corpo	poration name must contain the
word "chartered," "professional association," or the abbreviation "P.A."	> 70
R Enter new principal office address if applicables	## # # #
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	CO AND PROPERTY OF THE PROPERT
(1-100-put office unations in the part of	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the na	ame of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(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	ons of the position.
Signature of New Registered Agent, if changing	3

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	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change Add Remove	Title PC P	Stacy-Ann Coward 4 Stacy-Ann Coward 4 Tracy-Ann Coward	5 NW. 9th Dr. Planty
Change Add Remove			
3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add		<u> </u>	
Remove			

, ,,,,,,	(Be specific)
	•
If an amendment provides for an exch	lange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 4/15/20/6	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	lder
Dated5/11/20/4	
Signature	. 1
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	ner court
Stacy - Ann Coward (Typed or printed name of person signing)	
Dresident/Servetary	
(Tytle of person signing)	