## P16000023454

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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:ECO BRITE FL	CORP			
DOCUMENT NUM	IBER:P16000022454				
The enclosed Article	es of Amendment and fee are sub	omitted for filing.			
Please return all corr	respondence concerning this mat	ter to the following:			
	ZULAIDA TIRADO RAÍREZ	Z			
	Name of Contact Person				
	ECO BRITE FL CORP				
	<del></del>	Firm/ Company			
	15160 W COLONIAL DR 20	• •			
	Address				
	WINTER GARDEN, FL 347	87			
		City/ State and Zip Cod	c		
PRI	NCESSZULAIDA@HOTMAII	COM			
<del></del>	<del>-</del>	ed for future annual report	notitication)		
For further informati	on concerning this matter, please	e call:			
ZULAIDA TIRADO RAMIREZ		at (	3806-7396 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made p	ayable to the Florida Depo	artment of State:		
□ \$35 Filing Fee	☐S43,75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Cupy is enclosed)		
Ar Di P.0	ailing Address nendment Section vision of Corporations O. Box 6327 Hahassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ECO BRITE FL CORP (Name of Corporation as currently filed with the Florida Dept. of State) P16000022454 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." SAME B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: SAME (Mailing address MAY BE A POST OFFICE BOX) D. 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: Name of New Registered Agent (Florida street address) New Registered Office Address: (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 obligations of the position. Signature of New Registered Agent, if changing

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 Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	CARLOS U MENDEZ	15160 W COLONIAL DR 202	
Add			WINTER GARDEN, FL 34787	
X Remove				
2) Change		_	_	
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add			<del></del>	
Remove			<del></del>	
5) Change		<u> </u>	_	
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	· <del></del> - · · · · · · · · · · · · · · · · ·
	<del></del>
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<del> </del>	<del></del>
If an amendment provides for an exchange, reclassification, or cancellation of provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)  RTICLE IV	
HARE @ \$100.00 OWN BY ZULAIDA TIRADO RAMIREZ	

	09/01/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	2014/0017	
Effective date if applicable:	/014/2017	
interior date in appricable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this objectment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	t(s)
	pproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	nent
	st for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharehol	der
action was not required.	dopted by the incorporators without shareholder action and shareholder	
09/0	1/2017	
selec	director, president or other offices – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other co	
арро	inted fiduciary by that fiduciary)	
	ZULAIDA TIRADO RAMIREZ	
	(Typed or printed name of person signing)	
	PRESIDET	
	(Title of person signing)	