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COVER LETTER

TO: Amendment Section Division of Corporations

name of corporation: N2 Deep Cleaning Incorporated document number: P160000 30952	1
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Nuchan J. Dennis Name of Contact Person	
Firm/ Company	
P O BOX 470068	
Lake Monroe Fl 32747 City/ State and Zip Code	
E-mail address: (to be used for futbre annual report notification)	
For further information concerning this matter, please call:	
Norman L Dennis at (832), 414 2562 Name of Contact Person at (832), 414 2562 Area Code & Daytime Telephone Number	_
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation \mathbf{of}

	·
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	755 Lake Monroe Rd
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Lake Monrue, Fl 32747
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	fress in Florida, enter the name of the
Name of New Registered Agent	·
(Florida v	(reet address)
	5;
New Registered Office Address:	(City) , Florida , Cip Code)

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)

Example:

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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Dir	Davis, Cedis	2893 Jewel Ave
Add			Deltons FC 32734
X_Remove			
2) X Change	pres	Dennis, Nurman	100 Arbuc Lks Cr
Add			#221
3) Remove	<u> څو د</u>	Dennis, Kacin	Sanford FL 32171
Add		3	#221
Remove			Sanfard, Fr 3211
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>famending or adding additional Art</u> Attach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an excl provisions for implementing the ame	hange, reclassifica	tion, or cancellati	ion of issued sha	ires,	
(if not applicable, indicate N/A)			THE RESCUE		
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					_
		-			
					

The date of each amendment(s) adoption: $08-01-2020$, if other than the date this document was signed.
Effective date <u>if applicable</u> : 08 - 10 - 2020 (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, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voing group)
Signature Lani hish De wron
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Secretery (Title of person signing)