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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: FJAZ PRESSURE	CLEANING INC.			
DOCUMENT NUMI	D14000039145				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	FRANCISCO JAVIER ALV	'ARADO ZALDANA			
	Name of Contact Person				
	FJAZ PRESSURE CLEANING INC.				
	Firm/ Company				
	3670 SW 55TH AVENUE				
	Address				
DAVIE, FL, 33314					
	City/ State and Zip Code				
FJA7	.69@HOTMAIL.COM				
<del></del>	E-mail address: (to be us	sed for future annual report	notification)		
	n concerning this matter, please	786	234-4901		
Name	of Contact Person	at ( Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made				
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status 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 Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

\* FJAZ PRESSURE CLEANING INC.

( <u>Name</u>	of Corporation as currently	filed with the Florida Dep	ot. of State)	
P16000038145				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N//A			;	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	lo". A professional corpor	orated" or the abl	reviation
B. Enter new principal office address,		N/A		<del></del>
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			
			<u> </u>	
C. Enter new mailing address, if appl		N/A		
(Mailing address MAY BE A POST)	OFFICE BOX)	-		
		·		
D. If amending the registered agent ar		ess in Florida, enter the na	me of the	
new registered agent and/or the new	N/A			
Name of New Registered Agent	1N/A		-	
	(Florida stre	et addressi		
New Registered Office Address:	N/A		. Florida	
		City)	(Zip Co	rde)
			501 63	
New Registered Agent's Signature, if c		ish and a managed to a titize of the		
I hereby accept the appointment as regist	ierea ageni. Tam jamiliar w	ип ана ассері іне оонданої	ns of interposition.	71
			¥. ·	[
			in the E	r:
	Signature of New Re	gistered Agent, if changing		ş1-1-1-ş
			् <u>हि</u> ज	ThjAT
			. <u>.</u>	

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	JOSE M. ALVARADO	3670 SW 55TH AVENUE
Add			DAVIE, FL, 33314
Remove			
2) Change			
Add			
Remove			
3 ) Change		<del></del>	<del></del>
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Ramova			

	al sheets, if necessary). (Be specific)
	N/A
···	
an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares,
provisions for (if not app.	implementing the amendment if not contained in the amendment itself: icable, indicate N/A)
(5)	
	<u> </u>
•	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	

	12/03/2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date of Department of State's records.	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	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
·	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
12/03/20 Dated	018	
Signature <u>k</u>	Harr	
(By a selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	FRANCISCO JAVIER ALVARADO ZALDANA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	