(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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R. WHITE

COVER LETTER

TO: Amendment Section

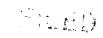
Division of Corporations
NAME OF CORPORATION: PYO CLEONING COYE INC
DOCUMENT NUMBER: \$\\\ \\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Suelen Zuniga Name of Contact Person
VOUY OQSIS INC Firm/Company
Firm/ Company
2083 N Bowerline Rd Ste 2
Address
Fomparo Booch fl 33069 City/ State and Zip Code
City/ State and Zip Code
Olalas Z Olahas as
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jaqueline Appendo Musitoz ai (186) 531 0311
Name of Contact Person 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 Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

Articles of Incorporation



(Document Number of Corporation (if known) arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the fits Articles of Incorporation: If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name ord "chartered," "professional association," or the abbreviation "P.A."	The new
ome must be distinguishable and contain the word "corporation," "company," or "incorporated" or Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name and "chartered," "professional association," or the abbreviation "P.A."	the abbreviation
orp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name rd "chartered," "professional association," or the abbreviation "P.A."	the abbreviation
orp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name rd "chartered," "professional association," or the abbreviation "P.A."	the abbreviation must contain the
Mark the second	
Enter new principal office address, if applicable:	
incipal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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)	
(Florida street address) New Registered Office Address:	(Zip 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)

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 Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones		•
X Add	<u>\$V</u>	Sally Sr	mith		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change	PT		Jaqueline	ARRIVED THUNHE	02 2725 NE 2745+ H2 Pompano Beach Fl 33064
Add	ලන	20ett	40U		Jampano Beach Fl 33064
Remove					
2) Change	*	 -			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change			····		
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
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	(Be specific)				
					
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provisions for implementing the ame	ange, reclassificat	ion, or cancellatication	on of issued shar ndment itself:	<u>'es.</u>	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassificat adment if not cont	ion, or cancellatication of the ame	on of issued shar adment itself:	<u>'es.</u>	
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The date of each amendment(s) adoption date this document was signed.	otion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date retment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The following statement ch 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	,"	
	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 07	8/16	
Signature COL	etor, president or other officer – if Arectors or officers have not been	
selected, b	by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	Jaqueline Appuda Mushoz (Typed or printed name of person signing)	<u>,</u>
	P	
	(Title of person signing)	

The date of each amendment(s) adoption:, if of date this document was signed.	her than the
Effective date if applicable:	
(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 I document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 07/18/2016	
Signature Schulline Alberta Hunton (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)	
\mathfrak{P}	
(Typed or printed name of person signing)	_
(Title of person signing)	<u> </u>