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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ECO SOLUTIONS	S SERVICES & MAINTER	NANCE, CORP	
	BER: P16000065669			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	MARIET OSTOS			
		Name of Contact Perso	n	
	SUCCESS BUSINESS SOLUTION, INC			
		Firm/ Company		
	2751 S CHICKASAW TRAI	L, STE #106, ORLANDO,	, FL 32829	
		Address		
	ORLANDO, FL, 32829			
		City/ State and Zip Cod	e	
MOS	STOS@MARIETOSTOS.COM	1		
		sed for future annual report	notification)	
For further information	on concerning this matter, pleas		7454684	
Name	of Contact Person	at (Area Co	) 7454684 de & Daytime Telephone Number	
Enclosed is a check fo	or 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 Fec Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.C	endment Section rision of Corporations Box 6327 lahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

Ai ticres 0	of		
ECO SOLUTIONS SERVICES & MAINTENANCE, CORP			
(Name of Corporation as curr	rently filed with the Florida Dept. of State)		
P16000065669			
(Document Numb	per of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation	<u>1:</u>		
N/A	The new		
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association." or the abbreviate	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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: N/A , Florida (City) , Florida (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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	SV		PEGGY URDANETA	AV. 11B CONJUNTO RESIDENC
X Add	<u> </u>			VILLA HERMOSA, CASA G1.
Remove				MARACAIBO, VENEZUELA.
2) Change				
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change	<u></u>			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<u> </u>	_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

1	09/19/2016	ic a a a
The date of each amendment(s) and date this document was signed.	doption:	, if other than the
<del>-</del>	9/2016	
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	ıt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
09/19/2016 Dated		
Signature	Humberto Villalobos	
	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	•
	HUMBERTO VILLALOBOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	