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COVER LETTER

	COVER LETTER
TO: Amendment Section Division of Corporations	tal Services Inc benitted for filing.
NAME OF CORPORATION: C 7 TO	tal Services Inc 器二位
DOCUMENT NUMBER:	6390
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
	Name of Contact Person
C <i>J</i> ·	Total Services Inc Firm/Company
6,06,1,1	Firm/ Company
8186 NW	99 terr
Hialeah G	Address sardens, FL 33016
	City/ State and Zip Code
E-mail address: (to be us	36 O GMQil. (om sed for future annual report notification)
For further information concerning this matter, pleas	se call:
Rdel Antonio FLORES Name of Contact Person	at (786) 590 · 8055 Area Code & Daytime Telephone Number
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:
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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

	Atticles of Afficialities
•	to
	Articles of Incorporation
• •	of
	(Name of Corporation as currently filed wi
CJ Total	Services Inc/ P16
	(Document Number of Corporation

ith the Florida Dept. of State) 0000 66390 tion (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendiment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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 New Registered Office Address: 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)	Title	Name	Address
1) Change	PÍ	FideLAntonio Flores	8186NW 99ter
Add			Higloghtardons, 1233016
Remove			
2) Change	pT	Fidel Flores GON4/e2	Higher Gardens, 12 33016
Add			Highen Gardens, 12 33016
X Remove			<u> </u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add	•		
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
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	•	
an amendment provides for an exc	hange, reclassification, or cancellation of	issued shares,
rovisions for implementing the am	hange, reclassification, or cancellation of endment if not contained in the amendme	issued shares, nt itself:
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, or cancellation of endment if not contained in the amendme	issued shares, nt itself:
rovisions for implementing the am	endment if not contained in the amendme	issued shares, nt itself:
rovisions for implementing the am	endment if not contained in the amendme	issued shares, nt itself:
rovisions for implementing the am	endment if not contained in the amendme	nt itself:
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provisions for implementing the am	endment if not contained in the amendme	nt itself:
provisions for implementing the am	endment if not contained in the amendme	nt itself:

	, if other than the
date this document was signed.	
Effective date if applicable: $12-10\cdot 18$	
Effective date <u>if applicable</u> : 12-10 18 (no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. T by the shareholders was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled t	
"The number of votes east for the amendment(s) was/w	ere sufficient for approval
by	n
by(voting group)	
☐ The amendment(s) was/were adopted by the board of director action was not required. ☐ The amendment(s) was/were adopted by the incorporators with action was not required.	
Dated	icer – if directors or officers have not been
selected, by an incorporator – if in tappointed fiduciary by that fiduciary	he hands of a receiver, trustee, or other court
Fide / Am	I name of person signing)
(Typed or printed	I name of person signing)
Pre	sident
(Title	e of person signing)