

Page: 4 of 8

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P16000076282

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EFRAIN HUERTAS

Name of Contact Person

1788 ELKCAM BLVD

Address

Firm/ Company

DELTONA, FL 32725

City/ State and Zip Code

FRANK@JMSPRAY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EFRAIN HUERTAS at (321) 765-3300 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

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is cnclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Bux 6327 Taliahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 2021-05-13 13:43:30 GMT

	B. A
Ar	ticles of Amendment
Art	to ides of lacorporation
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DELTONA CAR WASHING	2
(Name of Corporation a	as currently filed with the Florida Dept. of State)
P16000076282	She is
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sta Is Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation	eretion:
N/A	The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp." "Inc." or "chartered." "professional association," or the abbreviat	pration," "company," or "incorporated" or the abbreviation "Corp.," r "Co". A professional corporation name must contain the word tion "P.A."
3. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRE</u>	355)
5 - 15 - 14	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
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. If amending the registered agent and/or registered	office address in Florida, enter the name of the
new registered spent and/or the new registered offle	
Nome of New Registered Agent	
· · · · · · · · · · · · · · · · · · · 	(Floridu street address)
	Florida
New Projetured Office Address	, Florida (City) (Zip Code)
New Registered Office Address:	
<u>New Registered Office Address</u> :	
New Registered Office Address:	
lew Registered Agent's Signature, if changing Register	red Agent:
	red Agent:
lew Registered Agent's Signature, if changing Register	red Agent:

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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If amending the Officers and/or Directors, enter the title and same 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 = Chuirman 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 heid. 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	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
) Change	PSTD	EFRAIN HUERTAS	384 S. INDUSTRIAL DR
Add			ORANGE CITY, FL 32763
XRemove			
2) Change	P	JOSSYMAR MEDINA	28 EAGLES CT
X Add			MOUNT JULIET, TN 37122
Remove			
Add			
Remove			
 Change 			
Add			<u> </u>
Remove			<u></u>
5) Change			·
Add			
Remove			·
) Change			, <u></u> , <u></u> ,
Add			
Remove			

18884530509

From: Tax Zone

mending or adding addit ach additional sheets, if ne	icessary). (Be spec	cific)			
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The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	nt file dute)
Note: If the date inserted in thi document's effective date on the	is block does not meet the applicable statutory filing r Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors with	out shareholder action and shareholder
F The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast e sufficient for approval.	for the amendment(s)
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. I for each voting group entitled to vote separately on the	"he following statement amendment(s):
	east for the amendment(s) was/were sufficient for appro	val
by	(voting group)	"
Dated	s/1/21 Archat	ficers have not been
Signature(Br	a director president or other officer - if directors or off	
(B) see	a director president or other officer if directors or officered, by an incorporator if in the hands of a receiver, winted fiduciary by that fiduciary)	trusiee, or other court
(B) see	cted, by an incorporator - if in the hands of a receiver,	trusice, or other court
(B) see	inted by an incorporator – if in the hands of a receiver, sointed fiduciary by that fiduciary) <u>EFREM</u> <u>HVER</u> <u>FR</u> (Typed or printed name of person signin P	trusice, or other court
(B) see	cted by an incorporator – if in the hands of a receiver, winted fiduciary by that fiduciary) <u>EFREM</u> Hutte TA-S (Typed or printed name of person signin	trusice, or other court

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ALC: NOT THE OWNER OF