P16000079438

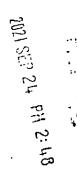
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: THE WERKS CO	MMERCIAL CLEANING	CORP		
	NBER: P16000079438				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	SAMUEL GUZMAN JR.				
	Name of Contact Person				
	THE WERKS COMMERCIAL CLEANING CORP				
	Firm/ Company				
	20861 JOHNSON ST STE 101				
	Address				
	PEMBROKE PINES FL 330	29-1926			
		City/ State and Zip Code	e		
	urbandt@bellsouth.net	sed for future annual report	- at Coation)		
For further informat	ion concerning this matter, plea		452-3225		
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment of State;		
□ \$35 Fiting Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE WERKS COMMERCIAL CLEANING CORP

Check if applicable

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

(Name o	of Corporation as currently	filed with the Florida Dept.	of State)
P16000079438			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Coartered," "professional association,"	Torp, " "Inc," or "Co". A		
B. Enter new principal office address, if applicable:		N/A	3
(Principal office address MUST BE A S			22
		-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C. Enter new mailing address, if appl	<u>icable:</u>	N/A	PH F
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)		72
	No.		
D. If amending the registered agent ar new registered agent and/or the new registered agent and/or the new registered.			ne or the
Name of New Registered Agent	SAMUEL GUZMAN JR.		
Sume to very registered agent	20861 JOHNSON ST STE	101	
	(Florida stre	et address)	
New Registered Office Address:	PEMBROKE PINES		33029-1926 Florida
New Registered Office Mainess.			(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	<u>hanging Registered Agent:</u> tered agent. I am familiar w	ith and accept the obligation:	s of the position.
			•
36	Simulation of March		
	signature of New Re	gistered Agent, if Aunging	

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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	þ	KAREN DAVILA	20861 JOHNSON ST STE 101
Add			PEMBROKE PINES, FL 33029-10
X Remove 2) Change	PVTS	SAMUEL GUZMAN JR.	20861 JOHNSON ST STE 101
X Add			PEMBROKE PINES, FL 33029-1
Remove Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove 6) Change			
Add			
Remove			

	additional sheets, if necessary). (Be specific)
N/A	
	·
. <u>lf an :</u>	mendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	sions for implementing the amendment if not contained in the amendment itself:
	if not applicable, indicate N/A)
∛A ———	
	· ·

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for utilicient for approval.	he amendment(s)
	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
bv		
	(voting group)	
Dated 9.20 Signature	1. 2021 Director, president or other officer – if directors or officers	have not been
selecti	ed, by an incorporator – if in the hands of a receiver, trust ned fiduciary by that fiduciary)	
	SAMUEL GUZMAN JR.	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	