160000 90676

(Requestor's Name)		.	
(Requestors Name)			
(Address)	_		
(Address)			
(City/State/Zip/Phone #)	_	.	
PICK-UP WAIT MAIL			
(Business Entity Name)		-	
(Document Number)		•	
Certified Copies Certificates of Status		-	
Special Instructions to Filing Officer:			
	R	Wil	HTE
Office Use Only	SE	P () {	2019



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COVER LETTER

Division of Corpo	rations		
NAME OF CORPOR	PULLODO	TOP Clean. 190676	int Conf
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
-	Oclides V 1755 U 9 Italeal	Firm/ Company Address City/ State and Zip Cod	T E-102
Live forther in Committee		sed for future annual report	notification)
ror turtner information	concerning this matter, pleas	se can:	
Delices.	In Carre	at (<u>786</u>	757-5119
Name o	i Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street	Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

	NING CONSIDER 28 PH 3:01
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
116000090676	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1255 W 49 PL AST 1013
(Principal office address <u>MOST DE A STREET ADDRESS</u>)	Halah R 33012
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1255 U 49 DL Apt 101B Haleah R 330R
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
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, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offiheld. 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 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 Chang 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	<u>Name</u>	<u>Addres</u> s				
1) Change	<u>P7</u>	Edie Avila Leyva	1 1299 W 49 PL APT 10 Haleah A 33012				
Add Remove			mulay Pt 35010				
2) Change							
Add							
Remove							
3) Change							
Add			· · · · · · · · · · · · · · · · · · ·				
Remove			<u> </u>				
4) Change							
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5) Change							
Add							
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6) Change							
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Remove							

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: $08/19/2019$ if other t	han t
date this document was signed.	
Effective date if applicable: 08/19/2019	
(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 listed document's effective date on the Department of State's records.	i as t
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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	
(voting group)	
☐ 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	
Signature	
(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)	
Delides Infante.	-
(Typed or printed name of person signing)	
11P:	
(Title of person signing)	

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