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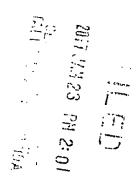
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JAN 25 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SANTANA	CLEANING COMPANY	
DOCUMENT NUMBER: P16000094906		
The enclosed Articles of Amendment and fed	c are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
LIANA E. FIGUERO	OA LOPEZ	
	Name of Contact Person	1
	Firm/ Company	
3080 MARTIN AVE	NUE	
	Address	
GREENACRES FLO	RIDA 33463	
	City/ State and Zip Code	e
LIANALOPEZF13@GMA	IL.COM	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matte	er, please call:	
LIANA E. FIGUEROA LOPEZ	at (562-3769
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount	t made payable to the Florida Depa	irtment of State:
\$35 Filing Fee \$\square\$		□\$52.50 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 Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SANTANA CLEANING COMPANY

(<u></u>	n as currently filed with the Florida Dept. of State)
P16000094906	
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the cor SANTANA CLEANING, PAINTING & FINISH COM	IPANY
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association." or the a	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDE</u>	<u>RESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	The comme
,	<u> </u>
	55
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, enter the name of the
	d office address in Florida, enter the name of the
new registered agent and/or the new registered of	d office address in Florida, enter the name of the ffice address:
	d office address in Florida, enter the name of the

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 <math>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	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	·			
Add				
Remove				
2) Change				<u>-</u>
Add		_		
Remove				
3) Change				
Add				
Remove				
Olaman				
4) Change		_		
Add Remove				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)

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f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The data of each amendment(s)	01/18/2017	, if other than the
The date of each amendment(s) date this document was signed.	аџориов:	, if other than the
•	1/18/2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this d Department of State's records.	ate will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following staten for each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
	adopted by the board of directors without shareholder action and sharehold	ier
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
01/18/20 Dated	017	
Signature	iona fiavezaa	
⊈(By a	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator — if in the hands of a receiver, trustee, or other conditional fiduciary by that fiduciary)	urt
	LIANA E. FIGUEROA LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	