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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JDVDS CLEANIN	G INC			
DOCUMENT NUM	IBER: P17000015982				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	LECIO DE PAULA				
		Name of Contact Person	1		
	BRILLIANT TAX SERVICES CORP				
		Firm/ Company			
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		Address			
	SARASOTA, FL 34276				
		City/ State and Zip Cod	e		
beitt	iantaxservices@gmail.com				
		sed for future annual report	notification		
	Than and con from a	,	,		
For further information	on concerning this matter, pleas	se call:			
LECIO DE PAULA		at (815-8886		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Insect, FL 32301		

17 AUG -2 AMIO: 55

Articles of Amendment to Articles of Incorporation of

JDVDS CLEANING INC		
(Name of Corpora	ation as currently filed with the Florida Dept. of State)	
P17000015982		
(Doc	nument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Flori its Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the foll	owing amendment(s)
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the w	ord "corporation," "company," or "incorporated" or i	The new
"Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	rp." "Inc," or "Co". A professional corporation name n	ust contain the
B. Enter new principal office address, if applicab		
(Principal office address <u>MUST BE A STREET AL</u>	DDRESS)	
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	30V)	14 1000
3.00		
		
		<u> </u>
D. If amending the registered agent and/or regist	tered office address in Florida, enter the name of the	
new registered agent and/or the new registered	d office address:	A TONA
Name of New Registered Agent		<u> </u>
		Ž.
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent	
hereby accept the appointment as registered agent.	l am familiar with and accept the obligations of the position	on.
Sign	nature of New Registered Agent it 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	JOSE F DA SILVA NETO	4908 LINWOOD ST		
Add			SARASOTA, FL		
X Remove			34232		
2) Change		_			
Add					
Remove					
3)Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change	<u></u>				
Add					
Remove					

[amending or adding additional Artical Artical Artical Additional sheets, if necessary).	(Be specific)				
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an amendment provides for an exch	ange, reclassifica	tion, or cancellat	ion of issued sh	iares.	
provisions for implementing the ame	ndment if not con	tained in the amo	endment itself:		
(if not applicable, indicate N/A)					
			<u> </u>		
					
					.

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	· ·	
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 date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
Dated 07	128/2017 Vanielle booksch	
selec	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	DANIELLE GOODRICK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . .