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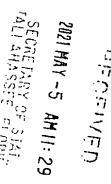
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Special Instructions to Filing Officer					

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HBRAHIM CLEAN	ING SERVICES INC		
DOCUMENT NUM	BER: P17000021100			
	s of Amendment and fee are sul	bmitted for filing.		
Please return all corre	espondence concerning this mat	tter to the following:		
	HUERTA PEREZ, CRISTIN	A		
		Name of Contact Person		
		Firm/ Company		
	12057 N BASIN ST			
	WELLINGTON, FL 33414	Address		
		City/ State and Zip Code	?	
	abril@pillarscomplianceacg.c	com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se cali:		
Barrios Balderas, Ab	ril G.	at (²⁰⁵	617-2359 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IBRAHIM CLEANING SERVICES INC

(Name o	f Corporation as currently	filed with the Florida Dept	. of State)		
P17000021100		-	<u></u>		
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>I</i>	Florida Profit Corporation ad	lopts the following	g ameno	lment(s) to
A. If amending name, enter the new na	me of the corporation:				
Ibrahim Painting & Remodeling, Inc.				The i	ทยาง'
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". A			n "Cor,	p., ''
B. Enter new principal office address,	12057 N BASIN ST				
(Principal office address MUST BE A STREET ADDRESS)		WELLINGTON, FL 3341-	1		_
C. Enter new maiting address, if applia (Mailing address MAY BE A POST) D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	OFFICE BOX) ad/or registered office addr	, SUITE 204-167	me of the	2.3 -5 VH II: 34	- - -
New Registered Office Address:	West Palm Beach		, Florida		
New Registered Agent's Signature, if c I hereby accept the appointment as regist Check if applicable	hanging-Registered Agents wered agent. I am familiar v Signature of New Ro	egtstered Agent, if changing	Zip (iode)	
Check if applicable ☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11)	(e), F.S.			

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)

Example:

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.

X Change	<u>P [</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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		_	
Add			
Remove			
2) Change			_
Add			
Remove 3) Change			_
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ts, if necessary).	(Be specific)				
					<u></u>	
						
			•			
						
						
<u> </u>						
					•••	
f an amendment pro-	vides for an excl	hange, reclassi	fication, or can	cellation of issu	ed shares,	
provisions for implei (if not applicable,	menting the ame , indicate N/A)	endment if not	contained in th	<u>e amendment i</u>	<u>tself:</u>	
7.						
						
	· · · · · · · · · · · · · · · · · · ·					

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without sh action was not required.	areholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for th by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fol must be separately provided for each voting group entitled to vote separately on the amen	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by 2:1	
(voting group)	
4/09/2021 Dated	
Signature XCVISING HoxxIq	
(By a director, president or other officer – if directors or officers l	
selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	e. or other court
y Cristing Hoerta	
(Typed or printed name of person signing)	•
President	

(Title of person signing)