911000046946

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(Requestor's Name)			
(Ad	ldress)		
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(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL MAIL	
(Bu	ısiness Entity Nar	me)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

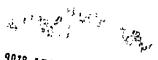


NAME OF CORPOR	ATION: C & L MOBILE I	DETAIL OF FORT MYER	S INC
DOCUMENT NUMB	ER: P17000046946	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
1	LUIS PALACIOS		
_		Name of Contact Person	n
(C & L MOBILE DETAIL O	F FORT MYERS INC	
_		Firm/ Company	
:	37 KIOWA DR		
-		Address	
1	FORT MYERS BEACH, FL	. 33931	
_		City/ State and Zip Cod	e
luispal	acio67@gmail.com		
`		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Luis Palacios		at (²³⁹	703-3460
Name of	Contact Person		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)
	ng Address		Address
	dment Section		ment Section

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



C & L MOBILE DETAIL OF FORT MYERS INC

2018	APR	Ιū	ā₩.	2 ~_	,
		<u> </u>	114	<u> </u>	•

	of Corporation as curren	tly filed with the Florida Dept. of State)
P17000046946	·	
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new na	ame of the corporation:	
	ation "Corp," "Inc," or	The new fon," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address,	if applicable:	37 KIOWA DR
(Principal office address MUST BE A S		FORT MYERS BEACH
		FL 33931
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		37 KIOWA DR
		FORT MYERS BEACH
		FL 33931
D. If amending the registered agent an		
new registered agent and/or the new	w registered office addres	<u>is:</u>
Name of New Registered Agent	LUIS PALACIOS	
	37 KIOWA DR	
	(Florida s	treet address)
New Registered Office Address:	FORT MYERS BEACH	, Florida 33931
		(City) (Zip Code)
New Registered Agent's Signature, if classified the second second the appointment as regist		<u>t:</u> with and accept the obligations of the position.

are 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, 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	P	CARLOS PALACIOS	5341 HAWKS LANDING DR 306
Add			FORT MYERS
X Remove			FL 33907
2) Change	PT	LUIS PALACIOS	37 KIOWA DR
X Add			FORT MYERS BEACH
Remove			FL 33931
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
= · · · - ·	
	
 	
. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
00 INITIAL SHARES WILL BE TRANS	FER TO LUIS PALACIOS
······································	

•	APRIL 4, 2018	
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
APRIL 4,	2018	
Effective date <u>if applicable</u> :	(no more than 90 days after	amendment file date)
Note: If the date inserted in this block document's effective date on the Department		ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficien		votes cast for the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each was	by the shareholders through voting voting group entitled to vote separate	groups. The following statement tely on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient	for approval
by	(voting group)	.,,
	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without sha	reholder action and shareholder
The amendment(s) was/were adopted b action was not required.	y the incorporators without shareho	lder action and shareholder
APRIL 4, 2018 Dated		•
Signature(By a director	r, president or other officer – if direct	ctors or officers have not been
selected, by a	n incorporator – if in the hands of a uciary by that fiduciary)	
Spposited in	Confor Palacios.	
	(Typed or printed name of per	son signing)
	Incorporat	tor
	(Title of person sig	