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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: NANCY CLEANIE	NG INC	
DOCUMENT NUMBER: P17000053025		
The enclosed Articles of Amendment and fee are su	omitted for filing.	
Please return all correspondence concerning this mal	ter to the following:	
NANCI ORTEGA		
	Name of Contact Person	
NANCY CLEANING INC.		
	Firm/ Company	
4863 DELL AVENUE		
	Address	
LAKEWORTH, FL 33461		
	City/ State and Zip Code	
CLMULTISERVICE1@GMAIL.C	OM	•
E-mail address: (to be us	ed for future annual report ne	otification)
		,
For further information concerning this matter, pleas	e call:	
NANCI ORTEGA	561-577-1268	1
Name of Contact Person	· · · · · · · · · · · · · · · · · · ·	& Daytime Telephone Number
Enclosed is a check for the following amount made I	ayable to the Florida Depart	ment of State:
■ \$35 Filing Fee	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton B 2661 Exc	ent Section of Corporations

Articles of Amendment to Articles of Incorporation

Nancy Clean	ing Inc.				
P17000053025	of Corporation as currently fi	led with the Florida Dept. of State)		
	(Document Number of Co	propration (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flo	rida Profit Corporation adopts the f	ollowing	; amend	ment(s) to
A. If amending name, enter the new na	nme of the corporation:				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	A professional corporation name		breviati	
B. Enter new principal office address, if applicable:		4863 DELL AVENUE			_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	OFFICE BOX)	4863 DELL AVENUE LAKEWORTH, FL 33461	J.A.	17 JI	-
D. If amending the registered agent an	- - d/or registered office address	in Florida, enter the name of the	13.	20 P	- <u> </u>
new registered agent and/or the new		in 1 Joriga, circe the hank of the	<u> </u>	-F.	٠٧
Name of New Registered Agent	NANCI C. ORTEGA NARAS	10		12: 4¢	
	4863 DELL AVENUE				
	(Florida street	address)	<u>.</u>		
New Registered Office Address:	LAKEWORTH	Florida_	13461		_
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			(Zip C osition.	ode)	
* NOV	OFTEOLD Signature of New Regi	stered Agent, if changing			

If amending the Office address of each Office (Attach additional sheet Please note the officer, P = President; V = Vic Executive Officer; CF held. President, Treast Changes should be not a change, Mike Jones Mike Jones, V as Remo Example:	er and/or I ets, if neces, /director tit ce Presiden O = Chief arer, Direct ted in the jo leaves the c	Director being sary) It by the first to T= Treast Open would be ollowing manicon.	ng added: et letter of the urer; S= Secr ificer. If an PTD. nner, Curren Sally Smith i	office title: cetary: D= D officer/directe tly John Doe	irector; TR= pr holds mor s listed as th	Trustee; C = C e than one title, ne PST and Mike	Chairman or Clerk list the first lette Jones is listed as	k; CEO = Chief er of each office s the V. Therc is
X_Change	<u>PT</u>	John Doc	John Doc					
X Remove	<u>V</u>	Mike Jone	<u> </u>					
_X Add	<u>şv</u>	<u>Şally Smit</u>	<u>th</u>		i			
Type of Action (Check One)	Title	<u>></u>	<u>Same</u>			<u>Addres</u> s		
I) X Change	<u>н</u>	<u> </u>	NANCI C. OF	RTEGA NAR	OLNA	4863 DELI	. AVENUE	
Add						LAKEWO	RTH, FL 33461	
Remove								
2) Change					<u> </u>			
Add								
Remove								
3) Change				-				
Add								
Remove								
4) Change								
Add								
Remove								
5) Change	_							
Add								
Remove								

6) ____ Change

_ Add

Remove

. If amending or adding additional Articles, enter change(s) b	here.
(Attach additional sheets, if necessary). (Be specific)	ite.
····	
	1
If an amendment provides for an exchange, reclassification,	or cancellation of issued shares,
provisions for implementing the amendment if not contained (if not applicable, indicate N/A)	ed in the amendment itself:
,,	
<u> </u>	
	-

07/05/20	17
The date of each amendment(s) adoption:date this document was signed.	, if other than the
07/05/2017	
Effective date if applicable:	
(no i	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not meed document's effective date on the Department of State's	t the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK)	ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	olders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	
by(voting gro	
(voting gro	эир)
■ The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	prators without shareholder action and shareholder
07/05/2017 Dated	
Signature 10 anci C	other officer - if directors or officers have not been
	or – if in the hands of a receiver, trustee, or other court
NANCI ORTEGA	
(Typed	or printed name of person signing)
PRESIDENT	
	(Title of person signing)