P17000064021

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APR 1 202

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: CLEWER	THAN YOU	R THOUGHTS	MOBILE CARWASH
DOCUMENT NUMBER				
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.		
Please return all correspor	ndence concerning this ma	tter to the following:		
	Ci	Name of Contact Person		<u>.</u>
(i <u>e</u>	NER THAN YOU	R THOUGHTS Firm/Company	MOBILE CAR	EWASH INC.
_	P.O.	Box 640 Address	813	
	ULETA	City/ State and Zip Code	33164	
_	E-mail address: (to be us	ed for future annual report		_
For further information co	oncerning this matter, pleas	se call:		
CÉCIL C	ontact Person	at (786 Area Co	de & Daytime Telephone N	umber
Enclosed is a check for th	e 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)	
Amendi Division P.O. Bo	Address ment Section n of Corporations x 6327 ssee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 8	10

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

(150.00	
(Name of Corneration as currently	FITS MOBILE CARWASH INC.
2	nica with the Florida Dept. of State)
P)700064021 (Document Number of Company)	Corneration (if known)
	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association." or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	491 NE 139\$ STREET
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	NORTH MIAMI, FLORIDA
	33161
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2022 1:
	228
D. If amending the registered agent and/or registered office address: Name of New Registered Agent New Registered Agent	77 Tea 1 1
491 NE 139	to STREET
(Florida stree New Registered Office Address: No RTH MIAM	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
Signature of New Neg	imerea rigent, y enunging

Check if applicable

☐ The amendment(s) is/are being filed pursuant 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>PT</u>	John Doc			
X Remove	<u>v</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	\searrow	NERISSA FISHER	3 NW 169th		
Add			STREET NORTH MIAM)		
X Remove			FLORIDA, 33161		
2) Change					
Add					
Remove Change					
Add					
Remove					
4) Change			···		
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					
Remove					

Attach additional	Iding additional Articles sheets, if necessary). (E	Be specific)			
	NIA				
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<u>f an amendment</u> provisions for in	provides for an exchang plementing the amenda	<u>te, reclassification,</u> nent if not contain	<u>, or cancellation of</u> ed in the amendm	<u>issued shares,</u> ent itself:	
(if not applic	able, indicate N/A)				
NIA					
			· · ·		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: N/A	
Effective date if applicable: V/H (no more than 90 days after amendment file days)	ie)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, 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 share action was not required.	cholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the a by the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment	C.
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 3/23/2022	
Signature	
(By a director, president or other officer - if directors or officers hav	e not been
selected, by an incorporator – if in the hands of a receiver, trustee, o appointed fiduciary by that fiduciary)	r other court
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Plesident	
(Title of person signing)	