01800002329

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(Ad	dress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DONCELLA'S CL	EANING, INC				
DOCUMENT NUMI	BER: P18000002329					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	ESTEBANIA H MCLENDO	N				
	· · · · · · · · · · · · · · · · · · ·	Name of Contact	Person			
	DONCELLA'S CLEANING	, INC				
		Firm/ Compa	any	<u> </u>		
	11317 CAMBRAY CREEK	•	•			
		Address				
	RIVERVIEW, FL 33579					
		City/ State and Z	ip Code			
DON	CELLASCLEANING@GMA	AIL.COM				
	E-mail address: (to be us	sed for future annual	report no	otification)		
For further informatio	n concerning this matter, pleas	se call:				
ESTEBANIA H MCL	.ENDON	at (53	380-1914		
Name		rea Code	& Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Floric	ia Departi	ment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing F Certified Copy (Additional copy enclosed)		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		Street A			
	endment Section ision of Corporations		Amendment Section Division of Corporations			
	P.O. Box 6327			Clifton Building		
Tall	lahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DONCELLA'S CLEANING, INC.

(Name of Corporation as current	ly filed with the Florida Dept. of State	<u>e</u>)
P18000002329		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
ALA		The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nan	or the abbreviation ne must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	- Ala	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	18 HY 23
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		PH 5: 27
Name of New Registered Agent	MA	
(Florida M	reet address)	
New Registered Office Address:	(City), Florida	(Zip Code)
	·	
New Registered Agent's Signature, if changing Registered Agent	•	
I hereby accept the appointment as registered agent. I am familiar		osition.
	NIA	
Signature of New 1	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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>v</u>	CAROLINA MUNOZ	10620 NAVIGATION DR
Add X Remove			RIVERVIEW, FL 33579
2) Change	<u>v</u>	SARAH FRIAS	12533 DAWN VISTA DR
X Add			RIVERVIEW, FL 33578
Remove 3) Change	T	ALEJANDRA MACE	2418 E CLARK ST
X Add			TAMPA, FL 33605
Remove			
4) Change	S	KATHERINE CHARLES	2420 E CLARK ST
X Add			TAMPA , FL 33605
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damous			

	dding additional A sheets, if necessary					
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an amendmen	<u>t provides for an e</u>	xchange, reclassifi	cation, or cancell	ation of issued sh	ares,	
rovisions for it	mplementing the a cable, indicate N/A	mendment if not co	ontained in the ar	nendment itself:		
	raine, madale WA	,				
NIA						
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	APRIL 23, 2018	: e .a .a .a
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were sul	oted by the shareholders. The number of votes cast for the ame ficient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and sl	hareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action and shareh	nolder
APRIL 23, Dated	2018	
Signature	rector, president or other officer – if directors or officers have	
selected	rector, president or other officer – if directors or officers have a , by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	
	ESTEBANIA H MCLENDON	
-	(Typed or printed name of person signing)	
	PRESIDENT .	

(Title of person signing)