P18000014791

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·	
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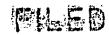
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: A C M MAI	NTENANCE SERVICE CORP					
DOCUMENT NUMBER: P18000014791						
The enclosed Articles of Amendment and fee	are submitted for filing.					
Please return all correspondence concerning th	nis matter to the following:					
DORIS POLANCO						
	Name of Contact Person					
DORIS ACCOUNTING	G & TAX SERVICE CORP					
	Firm/ Company					
10154 W FLAGER ST	• •					
	Address					
MIAMI, FL 33174						
	City/ State and Zip Code					
TAXES@DORISTAXES.CC	DM					
E-mail address: (to	be used for future annual report notification)					
For further information concerning this matter.	, please call:					
DORIS POLANCO	at (305 Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount i	made payable to the Florida Department of State:					
\$35 Filing Fee \$35 Filing Fe Certificate of Sta						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



A C M MAINTENANCE SERVICE CORP

(Name of Corporati	on as currently filed with the Flo MADEBE OF State 2 50
P18000014791	quere thry of this
(Docum	nent Number of Corporation (if knpmp) AHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006. Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	orporation:
	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered." "professional association." or the	d "corporation," "company," or "incorporated" or the abbreviation ." "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADL</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	∂V_1
(Muning data ess MAT BEAT OST OTTTEE BO	Δ/
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the
	once audress.
Name of New Registered Agent	
	(Florida street address)
Van David and Office Office	, Florida
New Registered Office Address:	(City) (Zip Code)
	the set Assessed
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	Istered Agent: I am familiar with and accept the obligations of the position.
D'	rature 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.

X Change	<u>PT</u>	John Doe	
X Remove	¥	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	ARAMIS CELEDON	550 NE 61 ST APT #11
Add			MIAMI, FL 33137
X Remove			
2) Change	P	CANDIDA MUNGUIA	550 NE 61 ST APT #11
X Add			MIAMI, FL 33137
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 -		
Add			······································
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
<u></u>		
		_
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	indifferent if not Contained in the amendment asen.	
		<u>,</u> _

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. It must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro	val
by	"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated	
Dated 1/1/8 Signature Francis Celedon	·
(By a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	
ARAMIS CELEDON	
(Typed or printed name of person signing	ng)
PRESIDENT	
(Title of person signing)	