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COVER LETTER

TO: Amendment Section Division of Corporations

M & H JANITORIAL QUALITY SERVICES, INC

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAMPO, MAYELIN

Name of Contact Person

Firm/ Company

261 BROWARD AVE

Address

GREENACRES, FL 33463

City/ State and Zip Code

maye7912@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAMPO, MAYELIN

Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

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M & H JANITORIAL QUALITY SERVICES, INC

M & HJANITORIAL QUALITY STATE (Name of Corporation as currently filed with the Florida DeSEOSFATEARY OF STATE TALLAHASSEE, FL

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

not applicable			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "	Co". A professional corpe	
B. Enter new principal office address, if a	oplicable:	525 SOUTH SEQUOIA	DRIVE
(Principal office address <u>MUST BE A STR</u>		WEST PALM BEACH	
		FLORIDA 33409	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		525 SOUTH SEQUOIA DRIVE	
		WEST PALM BEACH	
		FLORIDA 33409	
D. <u>If amending the registered agent and/or new registered agent and/or the new r</u> <u>Name of New Registered Agent</u>			ame of the
	25 SOUTH SEQUOIA D	RIVE	
—	(Florida str	eet address)	
<u>New Registered Office Address:</u>	EST PALM BEACH		33409 . Florida
		(City)	Zip Coder

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Example:

Remove

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.

 \mathbf{PT} X Change John Doe X Remove \underline{V} Mike Jones <u>X</u> Add SVSally Smith Type of Action Title <u>Name</u> Address (Check One) 525 SOUTH SEQUOIA DRIVE Р MAYELIN CAMPO 1) X Change WEST PALM BEACH ___ Add FLORIDA 33409 Remove 2) $\frac{X}{2}$ Change VΡ YASMANY CRUZ CAMPO 525 SOUTH SEQUOIA DRIVE WEST PALM BEACH ____Add FLORIDA 33409 Remove 3) ____ Change Add [4] Change ____ Add ___ Remove 5) ____ Change ____ Add ___ Remove 6) ____ Change ____ Add

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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N'A)

date this document was signed.	
(Effective date <u>if applicable</u> :	08/15/2018
<u>incente dance <u>in application</u></u>	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s).
"The number of votes c	cast for the amendment(s) was/were sufficient for approval
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by	
	<i>(voting group)</i> adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	
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