P18000018273

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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: JMK Commercial Commerci	Cleaning Servi	res, Inc.	
DOCUMENT NUMBER: P18000018273			
The enclosed Articles of Amendment and fee are sul	bmitted for fili	រន្ត.	
Please return all correspondence concerning this mat	iter to the follo	winā:	
London L. Bates, Esquire		<u> </u>	
London L. Bates Law, P.A.	Name of Co	ntact Person	
	Firm! (onipany	
P. O. Box 1213	T min X	congramy.	
	Add	ress	
Dunedin, Florida 34697			
	City' State a	nd Zip Code	
mark8360@nisn.com	!		
E-mail address: (to be us	sed for future at	mual report no	tificationi
For further information concerning this matter, pleas	se call:		
London L. Bates	at (727	734-\$700
Name of Contact Person		Area Code	& Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the l	lorida Departi	ment of State:
■ \$35 Filing Fee	☐\$43.75 Fil Certified C (Additional enclosed)	opy copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Division (Clifton B 2661 Exc	ent Section of Corporations

Articles of Amendment to Articles of Incorporation of

JMK Commercial Cleaning Services, Inc.	
(Name of Corporation as curren	ofly filed with the Florida Dept. of State)
P18000018273	
(Document Number	pf Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Healthcare Cleaning Consultants, Inc.	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company" or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	10730 Euclid Avenue #1017
(Principal office address MUST BE A STREET ADDRESS)	Cleveland, OH 44106
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10730 Euclid Ave =1017 Cleveland, OH 44106 Gress in Florida, enter the name of the
	Cleveland, OH 44106
	2 !
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	<u>k</u>
Name of New Registered Agent	
(Florida s	spect address;
v n i tom ill	et
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
Thereby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position.
Signature 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 Dae, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add Example: \underline{X} Change <u>PT</u> John Doc $\overline{\lambda}$ X Remove Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) Pres 13741 Rosette Road Jose Torres 1) ____ Change Hudson, FL 34669 ____Add Remove Pres Kelly Vaughn 10730 Euclid Ave., #1017 2) ____ Change X___ Add Cleveland, OH 44106 __ Remove 3.) ____ Change __ Add _ Rensove 4) ____ Change ____ Add __ Remove 51 ____ Change ____ Add ____ Remove 6) ____ Change

____ Add

Remove

. If nmending or adding additional Articles, enter change((Attach additional sheets, if necessary). The specifics	
VA	

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If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain	on, or cancellation of issued shares,
(if not applicable, indicate N/A)	ined in the smendment riser:
A	
A	
	<u> </u>
	}
	

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
tno more than 90	lays after aniondment file date)
Note: If the date inserted in this block does not meet the applicatedocument's effective date on the Department of State's records.	able statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throi must be separately provided for each voting group entitled to v	
"The number of votes cast for the amendment(s) was were	sufficient for approval
by	
by(voting group)	
☐ The amendment(s) was were adopted by the board of directors vaction was not required.	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators with action was not required.	ut shareholder action and shareholder
Dated 5 20 19	<u> </u>
	- if directors or officers have not been
selected, by an incorporator - if in the appointed fiduciary by that fiduciary)	hands of a receiver, trustee, or other court
Kelly Vaughn	
(Typed or printed n	nnie of person signing)
President and Secretary	
(Title of	person signing)