P1800029870

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: Amerikizen Property Solutions, Inc. DOCUMENT NUMBER: P180000 29670					
DOCUMENT NUMBER: P180000 298 70					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Walter J. Brown III Name of Contact Person					
Name of Contact Person					
891 Caran Dr.					
Apoka, tr. 32703					
Address					
Civil Protes and Tim Code					
City/ State and Zip Code					
amerikleen property Solutions & Amail-Con					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
To the first the state of the s					
Walter J. Brown III 31 407 , Gog. 5009					
Walter J. Brown III at 407 GGG. 5009 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee Certificate of Status □ \$43.75 Filing Fee Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					
Amendment Section Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building Tallahassee, Fl. 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2019 AUG-5 AH 8: 17

Amerikleen property Solutions, 1	NE - SURETARY OF STAT
	ndy filed with the Florida Dept. of State (AHASSEE, FIND)
	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviation	· "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.D. Box 168 Gotha, FL. 34734
	Gotha, FL. 34734
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office addr	ldress in Florida, enter the name of the ess:
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.
	on Paragraphy of Agapt (Cobanging

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> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Mgr.	Brittney a Brown	891 Cavan Dr.
X Add			Apop Ka, Fr. 39703
Remove			
2) Change			
Add			
Remove			
3) Change			- Medical Control
Add			·
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			···
Add			
Remove			

amending or adding additional Article attach additional sheets, if necessary). (Be specific)				
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an amendment provides for an exchar	nge, reclassificat	ion, or cancell:	ation of issued	shares.	
provisions for implementing the amend (if not applicable, indicate N/A)	Iment if not cont	ained in the an	nendment itse	<u>lf:</u>	
(i) not appacame, maicule MA)					
		· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	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 for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Angust 5, 2019 Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Watter J. from [11	
(Typed or printed name of person signing)	
Pies.	
(Title of person signing)	

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