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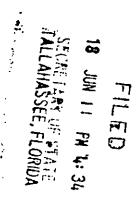
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JUN 12 2018 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: TOTAL CLEANIN	G COMFORT CORP	<u> </u>
DOCUMENT NUMBI	ER: P18000046308		
	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
١	'ARIMA TEJEDA MENOC	AL	
-	<u> </u>	Name of Contact Person	
T	OTAL CLEANING COMF	ORT CORP	
_		Firm/ Company	
i	5615 SW 49TH STREET		
_		Address	<u> </u>
N	иіамі, FL 33185		
-		City/ State and Zip Code	
ABRIT	O@ABRITOFINANCES.C	ОМ	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
YARIMA TEJEDA M	ENOCAL	_ at (de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TOTAL CLEANING COMFORT CORP

(Name o	f Corporation as curre	itly filed with the Florida	Dept. of State)		
P18000046308					
	(Document Number	of Corporation (if known))		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporal	tion adopts the fol	lowing amendm	ent(s) to
A. If amending name, enter the new na	me of the corporation:				
TOTAL CLEANING COMFORT INC				The nes	W,
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional c	ncorporated" or orporation name	the abbreviatio must contain th	n e
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A			
(Principal office address MOST DE AS	IKEET ADDRESS)				
o c	ankle.			A T	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A 	<u> </u>		77
				- C	F
			-	Mag -	<u>(− 1</u>
D. If amending the registered agent ar new registered agent and/or the ne			he name of the) 	
	N/A			P F	
Name of New Registered Agent		<u> </u>			
	N/A	street address)			
New Registered Office Address:		(City)	, Florida	(Zip Code)	
		(Cny)		(sup conc)	
New Registered Agent's Signature, if o	hanging Registered Age	ent:			
I hereby accept the appointment as regis	tered agent. I am famili	ar with and accept the obli	igations of the pos	sition.	
 	Signature of Ne	w Registered Agent, if cha	nging		

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				N/A
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additions (Attach additional sheets, if necess	d Articles, enter change (arv). (Be specific)	e(s) here:		
N/A				
				
				-
				_
		<u> </u>		
				·-
				···
<u> </u>				
				_ -
F. If an amendment provides for a	on avahanga raelassific	ation or cancellation	of issued shares.	
provisions for implementing the	he amendment if not cou	ntained in the amendr	ment itself:	
(if not applicable, indicate	N/A)			
N/A				
				
	·			
	<u> </u>			
			<u> </u>	
				

	05/18/2018	, if other than the
The date of each amendment(s) late this document was signed.	adoption:	, , , , , , , , , , , , , , , , , ,
Offective date if applicable:		
	(no more than 90) days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	ent(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required. 05/24/20 Dated		
(By sele	a director, president or other officer – if directors or officers have not bected, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	court
	YARIMA TEJEDA MENOCAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	MAS BRITO DONATES OMMISSION * GG041898 CPIRES October 25, 2020

1986 Burney

Page 4 of 4