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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:AY	'M CLEANING SERVICE	ES, IC		
OCUMENT NUMBER: P18000062677					
The enclosed Articles of Ame	endment and fee are su	ibmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
		MARIANA TOVAR			
	Name of Contact Person				
<u></u>		Firm/ Company			
	4165 NW 90TH AVE APT 104				
	Address				
	CORAL SPRINGS, FL 33065				
		City/ State and Zip Cod	e		
		maryctovar77@hotmail.	com		
E	-mail address: (to be u	sed for future annual report	notification)		
For further information conce	rning this matter, pleas	se call:			
MARIANA TOVAR		at (825-3572		
Name of Cont	act Person	Area Co)de & Daytime Telephone Number		
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:		
_	\$43.75 Filing Fee & Certificate of Status	☑S43.75 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			Address Iment Section		
Division of Corporations		Division of Corporations			
P.O. Box 6327 Taliahassee, Ft. 32314			Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AYM CLEANING SERVICES, INC

(Name of Corporation as currently filed with the Florida Dept. of State) P18000062677 (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: MYA CLEANING SERVICES, INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _. Florida 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

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	PT	John Do	<u>oe</u>	
X Remove	\underline{V}	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
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 additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A
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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)
N/A

	07/20/2018	
The date of each amendment(s) ac	doption:	, if other than the
date this document was signed.	22/20/10	
U//2 Effective date <u>if applicable</u> :	20/2018	
mappicane.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendatifficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following st 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 add action was not required.	opted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and sharehold	ler
Dated	7/20/18	
Signature	Marian O) Sono	
	irector, president or other officer - if directors or officers have not	been
	d, by an incorporator - if in the hands of a receiver, trustee, or other	
appoint	ted fiduciary by that fiduciary)	
	MARIANA TOVAR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	