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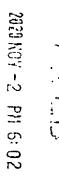
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<sup>nEC</sup> 11 2020 S. YOUNG

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: TR TEAM CLEAN	NING & ORGANIZING S	SERVICES INC
DOCUMENT NUM	BER: P18000100658		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	TAYNARA M VENTO		
		Name of Contact Perso	on
	TR TEAM CLEANING & O	RGANIZING SERVICES	SINC
		Firm/ Company	
	2161 NW 121ST AVE		
		Address	·
		City/ State and Zip Co	de
	TRTEAMSERVICES@GMA	AIL.COM	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further informatio	n concerning this matter, pleas		
TAYNARA M VENTO		at (	
Name of Contact Person		Area C	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	partment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amen Divisi The C 2415	t Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

TR TEAM CLEANING & ORGANIZING SERVICES INC

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P18000100658	
(Document Number	r 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:	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	3
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<u>o</u>
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses.	dress in Florida, enter the name of the
Name of New Registered Agent	
(Flex)	street address)
	sireer address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(zap code)
lew Registered Agent's Signature, if changing Registered Agenthereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position
The same of the second	. And accept the obligations of the position.
Signature of New	Registered Agent, if changing

neck if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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; CE() = 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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP		RUBIA F P GIACOMELLI PEREIR	2161 NW 121ST AVE
Add				PLANTATION FL 33323
X Remove				
2) Change	_	_		
Add				<del></del>
Remove ) Change		_		
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Change				
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n amandmant n	rovides for an exchange, r	roologgification or			
<u>ovisions for imp</u>	lementing the amendmen	t if not contained i	n the amendment i	tself:	
(if not applicat	ole, indicate N/A)				
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	10/28/2020		
The date of each amendment(s) adop	tion:	, if other than	n the
date this document was signed.			
10/28/20	020		
Effective date if applicable:			
	(no more than 90 da	ays after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart		le statutory filing requirements, this date will not be listed a	s the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopte action was not required.	d by the incorporators, or boar	rd of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopte by the shareholders was/were suffic		imber of votes cast for the amendment(s)	
☐ The amendment(s) was/were approvement be separately provided for each		h voting groups. The following statement e separately on the amendment(s):	
"The number of votes east for	the amendment(s) was/were s	ufficient for approval	
by		**	
	(voting group)	<del></del> _	
10/28/2020 Dated			
Dated		<del>_</del>	
Signature	i Dad		
		- if directors or officers have not been	
		ands of a receiver, trustee, or other court	
appointed t	fiduciary by that fiduciary)		
TA	YNARA M VENTO		
	(Typed or printed nam	ne of person signing)	
PR	ESIDENT		

(Title of person signing)