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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MARY CLEANING	G & HOME WATCHING	SERVICES CORP
DOCUMENT NUMI			
	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	MARIBEL DEL RIO CHAVI	ANO	
		Name of Contact Person	
	MARY CLEANING & HOM	E WATCHING SERVICE	S CORP
		Firm/ Company	
	5247 HEMINGWAY LN E	APT 1704	
		Address	
	NAPLES, FL 34116		
		City/ State and Zip Code	
MAF	RIBELDELRIOCHAVIANO@	GMAIL.COM	√
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:	
MARIBEL DEL RIC	CHAVIANO	at (305	709-8977
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	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)
An Div	niling Address nendment Section vision of Corporations D. Box 6327	Ameno Divisio	Address Iment Section on of Corporations a Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARY CLEANING & HOME WATCHING SERVICES CORP

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P19000001669	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
	SCR TA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	min I man
	THE TOTAL PROPERTY OF THE PROP
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City), Florida(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	astered Agent: I am familiar with and accept the obligations of the position.
Sian	ature 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP		MARISELA RUIZ ZAMORA	2497 BAYSIDE ST APT 2
X Add		_		NAPLES, FL 34112
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				·
Remove				
4) Change				
Add				
Remove				_
51 CT				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

atach additional	sheets, if necessary). (Be specific)				
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f an amendmen	t provides for an ex	xchange, reclassi	fication, or can	cellation of issu	ed shares,	
<u>provisions for i</u>	mplementing the a	mendment if not	contained in th	<u>e amendment it</u>	<u>self:</u>	
(if not appli	cable, indicate N/A)	ļ				
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The date of each amendment(s) as	04/26/2019 loption:, if other	than t
date this document was signed.		
	6/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be list partment of State's records.	ed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
04/26/2019		
DatedSignature	Bio	
(By a c selecte	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 court ted fiduciary by that fiduciary)	
	MARIBEL DEL RIO CHAVIANO	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	-