## P19000009896

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,,,-,-,-,-,-,,-,,-,,-,,-,,-,,-,,-,,-
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300435438803

08, 19 Liv 01778 -- 702 - \*\*\* : 23 :

SECRETAL OF STATE

RECEIVED

2024 SEP 19 AM 9: 52

Ai3

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MICWALIS PRO	CLEANING SERVICE, IN	C
DOCUMENT NUMB		<u> </u>	
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DEANO BARNES		
•		Name of Contact Person	
	MICWALIS PRO CLEANIN	G SERVICE	
-		Firm/ Company	
	150 COQUINA BAY DRIVE	• •	
-		Address	
	SAINT PETERSBURG, FL	33705	
•		City/ State and Zip Code	
	D.BARNES@MICWALIS.C	ОМ	
•	E-mail address: (to be us	sed for future annual report i	notification)
	concerning this matter, pleas		90 <i>57</i> 077
DEANO BARNES		at (850	) 8957027
Name o	f Contact Person	Area Cod	e & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depar	rtment of State:
S35 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)
Amer Divis P.O. I	ng Address Idment Section Idment Sec	Divisior The Ce 2415 N	address nent Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 see, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

(Name o	f Corporation as curre	ntly filed with the Florida Bei Sou	State)
P19000009896		SEN	AH 9: 44
	(Document Numbe	r of Corporation (if known) TALLA	HASSES TATE
Pursuant to the provisions of section 607, less Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts	s the following amendment
. If amending name, enter the new na	me of the corporation:		
MICWALIS COMMERCIAL ENTERPR	ISES, LLC		The new
ame must be distinguishable and contain 'Inc.," or Co.," or the designation "C 'chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation name	
Enter new principal office address, i	f applicable:	N/A	
Principal office address <u>MUST BE A ST</u>			
C. Enter new mailing address, if applicable:		N/A	
(Mailing address <u>MAY BE A POST (</u>	OFFICE BOX		
			<del></del>
). If amending the registered agent an	d/or registered office of	Idress in Florida, enter the name of	Fthe
new registered agent and/or the new			· tric
The state of the s		<del>-7.54</del>	
	N/A	<del></del>	
Name of New Registered Agent	N/A N/A		<u></u>
Name of New Registered Agent	N/A	street address)	
Name of New Registered Agent	N/A	street address)	nida <sup>N/A</sup>

Cbeck if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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; 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 <math>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>Jo</u>	ohn Doe			
X Remove	<u>V</u> <u>M</u>	like Jones			
<u>X</u> Add	<u>SV</u> <u>S</u> :	olly Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1)Change	N/A				
Add					
Reinove					
2) Change	*				
Add					
Remove 3) Change		<u></u>	<u>.                                    </u>		
Add					_
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change				<del> </del>	
Add					
Remove					

\	ending or adding additional Articles, enter change(s) here: a additional sheets, if necessary). (Be specific)
	<del></del>
	<u> </u>
<del></del> -	
f an e	mendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provi</u>	sions for implementing the amendment if not contained in the amendment itself:
(	fnot applicable, indicate N/A)

J

The date of each amendment(s) date this document was signed.	adoption: if other than the
_	petember 18, 2024
Effective date if applicable:	·
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not neet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	, ··
	(voting group)
09/18/20	2-4
Dated	
Signature	Do
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	DEANO BARNES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)