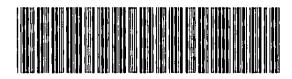
P19000031866

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: CLEO-CLEANIN	G, CO.	
DOCUMENT NUMBI			
	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
j	OSE JARDIM JUNIOR		
_		Name of Contact Person	1
τ	'AX DIRECT INCORPORA	ATED	
_		Firm/ Company	
5	787 VINELAND RD 205		
_		Address	
	ORLANDO, FL 32819		
_		City/ State and Zip Cod-	e
jij@tax	directflorida.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JOSE JARDIM JUNIOR		at (
Name of 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)
Amen Divisi P.O. F	ng Address dment Section on of Corporations Box 6327 lassee, FL 32314	Amend Divisio Clitton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CLEO-CLEANING, CO.

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P19000031866	
(Docum	ent 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 abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
	<u> </u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	
	= -
	FI 5: 25
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Signe	nture 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.

XChange	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	CLEO DE BRITO HIRATA	7502 PACIFIC HEIGHTS CIRCLE
Add			ORLANDO, FL 32835
Remove			
2) Change	P	CLEONICE DE BRITO HIRATA	
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here (Be specific)		
			
-			**
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-			
		•	
f an amendment provides for an exch	ange, reclassification, or	cancellation of issued s	hares.
provisions for implementing the amel (if not applicable, indicate N/A)	ndment if not contained in	the amendment itself:	<u></u>
χη την αρφητεάδες, πατέατε τον τη			
<u> </u>	-		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemed must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	г
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated $04.22.19$	
Signature Chain De Buto Virata	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
CLEONICE De BRITO HIRATI	2.
(Typed or printed name of person signing)	
(Title of person signing)	••