P190000 48288

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	
(=	,,	,
PICK-UP	WAIT	MAIL
	siness Entity Nan	ne)
	·	•
	cument Number)	
(D0	cament Namber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
	3	

Office Use Only



800340356858

02/06/20--01013--019 +*35.00

R. WHITE MAR 0 2 2020 78/0F 12-6 F7 1:28

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ODI CARPET &	TILE CLEANING, INC.	
	BER: P19000048288		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Odalys Fuentes		
		Name of Contact Person	1
	ODI CARPET & TILE CLE	ANING, INC.	
		Firm/ Company	
	3222 W GROVE ST	,	
		Address	
	TAMPA, FL 33614		
		City/ State and Zip Code	e
	yoaletty1@gmail.com		
		sed for future annual report	notification)
For further information	on concerning this matter, plea	se call: 786	740-1384
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
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)
	iling Address		Address
	endment Section rision of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee			
Tal	lahassee, FL 32314	2415 8	N. Monroe Street, Suite 810
		Tallaha	issee, FL 32303

Articles of Amendment to Articles of Incorporation of 2220 Fig. 1:28

ODLCARPET & THE CLEANING INC.

	rently filed with the Florida Dept. of State)
P19000048288	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, is Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>n:</u>
N/A	The new
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 "F	n." "company," or "incorporated" or the abbreviation "Corp.," ". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
	
). If amending the registered agent and/or registered office:	address in Florida, enter the name of the
If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
new registered agent and/or the new registered office add	
new registered agent and/or the new registered office add	
Name of New Registered Agent N/A	
Name of New Registered Agent Note: Note: New Registered Agent (Florid	la street address)
Name of New Registered Agent N/A	lress:
Name of New Registered Agent Nich State of New Registered Agent (Florid	la street address) Florida
Name of New Registered Agent Nich State of New Registered Agent (Florid	la street address) Florida
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Registered Office Address: www.Registered Agent's Signature, if changing Registered Agent's Sign	la street address), Florida (City)
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Registered Office Address: ew Registered Agent's Signature, if changing Registered Agent	la street address), Florida (City)
new registered agent and/or the new registered office add Name of New Registered Agent (Florid New Registered Office Address: www.Registered Agent's Signature, if changing Registered Agent's Sign	la street address), Florida (City)
Name of New Registered Agent Nich State of New Registered Agent (Florid	la street address), Florida (City)
Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent Agent's registered agent. I am family	la street address), Florida (City)
Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent Agent's registered agent. I am family	la street address), Florida (City) Zip Code) gent: liar with and accept the obligations of the position.

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	<u>P1</u>	John Do	<u>se</u>	
X Remove	<u>V</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	V		Manuel Castillo Miranda	3222 W GROVE ST
X Add			_	TAMPA, FI. 33614
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_	- LAS LEV	
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
· · · · · · · · · · · · · · · · · · ·

· · · · · · · · · · · · · · · · · · ·

. 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

· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·

٠.

) adoption:	, if other than the
late this document was signed.	1/20/2020	
	1/30/2020	
<u></u>	(no more than 90 days after amendment file date)	
	s block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendr sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following state of each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/30/20	020	
Dated	Tuentes	
selec	a director, president or other officer – if directors or officers have not be sted, by an incorporator – if in the hands of a receiver, trustee, or other hinted fiduciary by that fiduciary)	
	Odalys Fuentes	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	_