P19000048413

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	NING SERVICE, INC	
DOCUMENT NUME	P19000048413 ER:		
The enclosed Articles	of Amendment and fee are su	bmitted for tiling.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MERCELENA GALLEGO		
	Name of Contact Person MERCE'S CLEANING SERVICE, INC		
•	6275 S WILLIAMSON BLA	Firm/ Company (1)	
	PORT ORANGE, FL 32128	Address	***************************************
,	<u> </u>	City' State and Zip Cod	le
	INFO@ VALDERRAMA.US	·	
	E-mail address; (to be us	ed for future annual report	(notification)
For further information	concerning this matter, pleas	se call:	
CARLOS VALDERR		321 at (206-8377
Name o	f Contact Person	Area Co	nde & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to

Articles of Incorporation

P19000048413	i as currently filed with the Flor	
(Docume	ent Number of Corporation (if know	an)
ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation:	Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s
. <u>If amending name, enter the new name of the co</u>	poration:	
une must be distinguishable and contain the word "con	noration " "company " or "invar	The new porated" or the abbreviation "Corn."
lnc.," or Co.," or the designation "Corp," "Inc." chartered," "professional association," or the abbres	or "Co". A professional corpo	ration name must contain the word
. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
	·	2
		ن
. If amending the registered agent and/or registere	d office address in Florida, enter	the name of the
new registered agent and/or the new registered o	ffice address:	
N/A <u>Name of New Registered Agent</u>		
	1	
	(Florida street address)	
N. B		
New Registered Office Address:	(Cuvi	, Florida (Zip Code)
	· ••••	· raq · · · ran /
ew Registered Agent's Signature, if changing Regis	tered Avent:	

Signature of New Registered Agent, it changing

Check if applicable \square 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 + Trustec, 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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	Hy Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
	TR	ALEJANDRO MORALES	6275 S WILLIAMSON BLVD
1) Change Add			PORT ORANGE, FL 32128
Remove			
	S	JUANITA MORALES	6275 8 WILLIAMSON BLVD
2) Change Add			PORT ORANGE, FL 32128
Remove 3 + Change			
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary). N/A	eles, enter change((Be specific)	s) here:		
	-	·		
		<u>,</u>		
-				
		<u> </u>		
			<u> </u>	
				-
. If an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassificati idment if not cont:	on, or cancellation tined in the amend	of issued shares, Iment itself:	
				<u>-</u> 1
		•		·
		-		
				

The date of each amendment(s)	idoption:	
date this document was signed. H	HY 1, 2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendme	on file dater
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors wit	hout shareholder action and shareholder
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cas ufficient for approval.	t for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups, reach voting group entitled to vote separately on the	The following statement : amendment(s):
"The number of votes cas	(for the amendment(s) was were sufficient for appre	wal
bv		
	(voting group)	<u> </u>
JUNE 31	. 2020	
Dated		
Signature	Meelina Calleis	
selecti	firector, president or other officer - if directors or of d. by an incorporator — if in the hands of a receiver, ned fiduciary by that fiduciary) MERCELENA GALLEGO	ficers have not been trustee, or other court
	(Typed or printed name of person signir PRESIDENT	යි) -
	(Title of nerson signing)	