P19000048886

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A. BUTLER
JUN 1 1 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: Facility Service Ex	sperts Inc.			
	1BER: P19000048886				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Mike Ramos				
		Name of Contact Persor	1		
	Facility Service Experts Inc.				
	Firm/ Company				
	8233 Gator Ln Ste 25				
		Address			
	West Palm Beach, FL 33411				
		City/ State and Zip Code	2		
	mike@fsefl.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati Mike Ramos	on concerning this matter, pleas		719-8152		
	e of Contact Person	at (Area Coo	de & Daytime Telephone Number		
	for the following amount made				
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ar Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 Ilahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

Facility Service Experts, Inc.	urrently filed with the Florida Liver of State
(Name of Corporation as c	urrently filed with the Florida wopk or State
19000048886	PECRETALLY OF STATE
(Document Nu	imber of Corporation (if known) TEV LAPLESSEE, FL
ursuant to the provisions of section 607.1006, Florida Statut s Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(
If amending name, enter the new name of the corporat	tion:
	The new
ame must be distinguishable and contain the word "corporat lnc.," or Co.," or the designation "Corp," "Inc," or "c chartered," "professional association," or the abbreviation Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
The tiput of the same of the s	
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered off new registered agent and/or the new registered office; 	nddress in Florida, enter the name of the
new registered agent and/or the new registered office	audress.
Name of New Registered Agent	
(F)	lorida street address)
N no Projetanad (Affice Address)	Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Office Address:	(City) . Florida
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fo	d Agent: amiliar with and accept the obligations of the position
nerety accept the appointment as registered agent. I am jo	aminar wan and accept the ooriginations by the position.
Sanatura	of New Registered Agent, if changing

Check if applicable

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>PT</u>	John Doe	
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)Change	V	Leonard Shapiro	8233 Gator Ln Ste 25
Add			West Palm Beach, FL 33411
X Remove			
2) Change			
Add			
Remove 3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
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				-
				
f an amendment provides for an exch	ongo roclossificati	on or concollation	of icenad charge	
provisions for implementing the ame	ndment if not conta	nined in the amend	dment itself:	
(if not applicable, indicate N/A)				
				

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÷.,.		
' The date of each amendment(s) a	3/31/22 dontion:	if other than the
date this document was signed.	doption:	If other than the
3/3:	/21	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this bedocument's effective date on the Do	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder a	ection and shareholder
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment of the approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	_ 	
	(voting group)	
3/31/21 Dated		
Signature	1/h	
(By a d selecte	irector, president or other officer - if directors or officers have not be d, by an incorporator - if in the hands of a receiver, trustee, or other c ted fiduciary by that fiduciary)	
	Michael Ramos	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	