P19 0000 58764

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PICK-UP WAIT MAIL	
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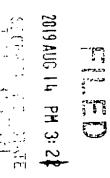


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	•	COVERTEITER	•		
TO: Amendment Se Division of Cor			.		
NAME OF CORPO	ORATION: Greasebusters of C	Orlando, Inc			
DOCUMENT NUM	D10000058764				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Kevin Robert Schwartz				
		Name of Contact Persor	l		
	Greasebusters of Orlando, Inc				
	Firm/ Company				
	61 Sedona Cove Drive				
		Address			
	Apopka FL 32703				
		City/ State and Zip Code	3		
kevi	nschwartz19@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Kevin Schwartz		at (<u>443</u>	878-5840		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment 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)		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

Greasebusters of Orlando, Inc.		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P19000058764		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendm	ent(s) t
A. If amending name, enter the new name of the corporation:		
	The nev	av
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation ""Co". A professional corporation name must contain the	n
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	955 019	
	JUG -	
		محمدان
C. Enter new mailing address, if applicable:	PO Box 102397	4
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Clermont FL 34712	2
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address		
	331	
Name of New Registered Agent		
{rionaa :	street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
	(City) (Elly Colles)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		
, , , ,	, , , , , , , , , , , , , , , , , , , ,	
6. (1)	Decision of the section	
Signature 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)

Remove

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.

Mike Jones, V as Remove Example:	, and Sal	ly 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>	Name	Address
1) Change	<u>T</u>	Robert Anthony Schwartz	61 Sedona Cove Drive
X Add			Apopka Fl 32703
Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(Churrie			
6) Change			
Add			

Attach additi	or adding additional A onal sheets, if necessary). (Be specific)			
·					
					
					<u></u>
					· · · · · · · · · · · · · · · · · · ·
					
provisions f	nent provides for an exor implementing the aroppicable, indicate N/A)	nendment if not e	cation, or cancella ontained in the an	ation of issued shar nendment itself:	res,
					· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this bedocument's effective date on the De		filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of vo ficient for approval.	otes cast for the amendment(s)
	roved by the shareholders through voting greach voting group entitled to vote separatel	
"The number of votes cast	for the amendment(s) was/were sufficient fo	r approval
by		
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without share	holder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without sharehold	er action and shareholder
August 10th	2019	
Dated		
Signature	Charin Shan	<u>~`</u>
(By a di	rector, president or other officer - if directo	
	, by an incorporator – if in the hands of a re ed fiduciary by that fiduciary)	ceiver, trustee, or other court
	Kevin Schwartz	
	(Typed or printed name of perso	n signing)
	President	

(Title of person signing)