P190000 67316

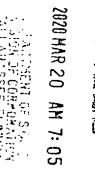
Special Instructions to Filing Officer:				

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APR 02 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: DP CLEANING	SERVICE CORP		
DOCUMENT NUMBE	P19000067			
The enclosed Articles of	"Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	itter to the following:		
		PINTO, DANIELE	E	
_		Name of Contact Person	n	
		DP CLEANING SERVIC	E CORP	
		Firm/ Company		
		10579 FOX SQUIRE	REL CT	
4P	1			
JACKSONVILLE, FL, 32257				
_	City/ State and Zip Code			
		danielepinto26@hotmail	com	
	E-mail address: (to be us	sed for future annual report		
	`	r	,	
For further information of	concerning this matter, pleas	se call:		
Daniele Pinto		954 at (261-6205	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ameno Divisio P.O. B	ng Address dment Section on of Corporations ox 6327 assee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

DP CLEANING SERVICE CORP

(Name of Corporation as	s currently filed with the Florida Dept. of State)
	P19000067316
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutts Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ration:
	The new
name must be distinguishable and contain the word "corpora" lnc., " or Co., " or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviatio	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRES.	(\underline{S})
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	三 三 一
	Francisco -
	े जिल्ला की
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered office	e address:
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	ed Agent: familiar with and accept the obligations of the position
The containing appointment as region (cat agent. Train)	juminal with and accept the obligations of the position.
Signature o	of New Registered Agent, if changing

Check if applicable

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 = 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.

Example: X Change	PT	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>	Address		
1) Change	VP	POLLYANNA SENA LANDIM	11547 GWYNFORD LN		
Add			JACKSONVILLE, FL, 32223		
x Remove					
2) Change					
Add					
Remove Change					
Add					
Remove					
4) Change		-			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

atach <i>additional she</i>	ng additional Art ects, if necessary).	(Be specific)				
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				<u></u> .	······································	
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_,				<u>.</u>	 	
						
an amendment provisions for imple (if not applicabl	ovides for an exclude ementing the amede, indicate N/A)	nange, reclassif Indment if not (ication, or cane contained in the	ellation of issue amendment it	ed shares, self:	
						
,	<u> </u>				-	
<u> </u>						

	02/02/2020	
The date of each amendment(s) adopt date this document was signed.		, if other than the
Effective date if applicable:	02/02/2020	
<u></u>	(no more than 90 days after amendment file date	e)
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the arent for approval.	nendment(s)
	ed by the shareholders through voting groups. The follow is voting group entitled to vote separately on the amendme	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
Dated	1 eterno	
selected, by	or, president or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee, or duciary by that fiduciary)	
	DANIELE E PINTO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	