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COVER LETTER

TO: Amendment Section Division of Corporations

A Company of the Company

NAME OF CORPORATION:	Xclusive Auto Care, INC.				
DOCUMENT NUMBER:	P20000006605				
The enclosed Articles of Amendment and	I fee are submitted for filing.				
Please return all correspondence concerns	ing this matter to the following:				
	Azencleive M. DeSouza				
	Name of Contact Person				
	Xclusiv Auto Detail, INC.				
	Firm/ Company				
	14159 Winding Cedar Way				
	Address				
	Fort Myers, FL 33913				
	City/ State and Zip Code				
E-mail addres	az_desouza@hotmail.com ss: (to be used for future annual report notification)				
	•				
For further information concerning this n	natter, please call:				
Azencleive DeSouza	at () 848-1255				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following am	ount made payable to the Florida Department of State:				
\$35 Filing Fee					
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee				

Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of

Xclusive Auto Care, INC.

	Cale, INC.	
(Name of Corporation as currently	y filed with the Florida Dept. of State)	
P20000	0006605	
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation:		
Xclusiv Auto Detail, INC.		
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co." or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	Xclusiv Auto Detail, INC.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	3112 Palm Ave Unit# 5	
	Fort Myers, FL 33901	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Xclusiv Auto Detail, INC.	
	14159 Winding Cedar Way	
	Fort Myers, FL 33913	
D. If amending the registered agent and/or registered office adding registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida sır	eet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v		
thereby accept the appointment as registered agent. I am juminar	75	
	Peristered Agent if Changing	
Signature of New R	Pegistered Agent, if changing	
v. •	A A	
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)

Example:

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>	<u>John Doc</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u> </u>	
·	
<u> </u>	

The date of each amendment(s) adopt date this document was signed.	ion:	_, if other than the
Effective date if applicable:	June 19, 2024	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will ment of State's records.	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 shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	(voting group)	
Signature (By a direct selected, by	or president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	_
appointed ?	Azencleive M. DeSouza	
	(Typed or printed name of person signing)	-
	Dracidant	
	President (Title of person signing)	
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