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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PREMBOR	KE PRO CLEANING CORP
DOCUMENT NUMBER: P20000067566	
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
HENRY G NAVARI	RO
	Name of Contact Person
PREMBOKE PRO C	LEANING CORP
	Firm/ Company
12651 SW 16TH CT,	SUITE 308B
	Address
PEMBROKE PINES	. FL 33027
	City/ State and Zip Code
hnavarronavarroasoci	ados@email.com
	(to be used for future annual report notification)
For further information concerning this matt	er. please call:at (\frac{305}{2000}) \frac{8048826}{20000}
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amour	at made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Certificate of S	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PREMBOKE PRO CLEANING CORP

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P20000067566	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
PEMBROKE PRO CLEANING CORP	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	29
	7923 C
C. Enter new mailing address, if applicable:	. 1
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	œ _
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
	
Name of New Registered Agent	
(FL-: J-	street address)
	neet address)
New Registered Office Address:	(City), Florida (Zip Code)
	(city)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	<u>nt:</u> r with and accept the obligations of the position.
Signature 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.

X Remove V Mike Jones X Add SV Sally Smith Type of Action (Check One) Title Name Address 1) Change	Example: X Change	<u>PT</u>	John Doc		
X Add SV Sally Smith Type of Action (Check One) Title Name Address 1) Change	X Remove	<u>V</u>	Mike Jones		
(Check One) 1) Change	X Add				
AddRemove 2)ChangeAddRemoveAddRemove 4)ChangeAddRemove 5)ChangeAddRemoveAddRemove		<u>Title</u>	Name		<u>Addres</u> s
Remove 2)Change	1) Change				
2) Change	Add				
Add Remove Change Add Remove 4) Change Add Remove 5) Change Add Remove	Remove				
Add Remove Change Add Remove 4) Change Add Remove 5) Change Add Remove	2) Change		<u>-</u>		
3) Change					
Add	Remove 3) Change				
4) Change				, 	
Add	Remove				
	4) Change				
5) Change	Add				
Add	Remove				
Add	5) Change				
Remove	Add				
					
Add					
Remove					

Attach additional.	lding additional Art sheets, if necessary).	(Be specific)			
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If an amendment	provides for an exc plementing the ame	hange, reclassifica	ition, or cancellat	<u>iion of issued sha</u> endment itself:	res,
(if not application	able, indicate N/A)	manent ii ttor eo.		endment tisem	
		<u> </u>			
				<u></u>	
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The date of ea	ch amendment(s) ad	09/02/2020 option:	, if other than i
	ient was signed.		
		/2020	
Effective date	if applicable:	(no more than 90 days after amendment file	date)
		ock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as t
Adoption of A	mendment(s)	(<u>CHECK ONE</u>)	
The amendan action was n	•	oted by the incorporators, or board of directors without sh	hareholder action and shareholder
	nent(s) was/were ado cholders was/were su	oted by the shareholders. The number of votes east for the ficient for approval.	ne amendment(s)
must he sep	arately provided for	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amen	
		or the amendment(s) was/were sufficient for approval	
by PA	NOLA HERRERA	n	
		(voting group)	
	09/02/2020 Dated		
	Signature	(Elmi)	
	selected	ector, president or other officer – if directors or officers leads of a receiver, trusted of fiduciary by that fiduciary)	
		PAOLA HERRERA	
	•	(Typed or printed name of person signing)	
		PRESIDENT	
	•	(Title of person signing)	