## P20 000068524

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## COVER LETTER

TO: Amendment Sec Division of Corp							
NAME OF CORPO	RATION: MELO ON THE G	O CLEANING SERVICE	INC				
DOCUMENT NUM	D20000068524						
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:					
	MELODY BOSTIC						
		Name of Contact Person					
	MELO ON THE GO CLEAN	IING SERVICE INC					
		Firm/ Company	<del></del>				
	1735 36TH ST	Thin Sompany					
		Address					
	ORLANDO FL 32839						
		City/ State and Zip Code	•				
	MELODYORLANDO1@AC	DL.COM					
	E-mail address: (to be us	ed for future annual report	notification)				
For further information	on concerning this matter, pleas	se call:					
MELODY BOSTIC		at (	272:1-5813				
Name	of Contact Person	Area Co	272°-5813 de & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:				
\$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)				
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassec, 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 Articles of Incorporation of

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MELO ON THE GO CLEANING SERVICE INC.		
(Name of Corporation as current	ntly filed with the Florida De	pt. of State)
P20000068524		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
		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.2"	A professional corporation	l" or the abbreviation "Corp.," name must contain the word
3. Enter new principal office address, if applicable:	1735 36TH ST	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	ORLANDO FL	
	32839	1020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1735 36TH ST	
· · · · · · · · · · · · · · · · · · ·	ORLANDO FL	<u> </u>
	32839	Ċ.
		ű,
<ol> <li>If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address.</li> </ol>		ame of the
Name of New Registered Agent MELODY BOSTIC		
Same of New Negativea Figure		
	street address)	
(Florida		
(Florida 1735 36TH ST ORLA) New Registered Office Address:	NDO	, Florida 32839

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 Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	p	MELODY BOSTIC	1406 GLENMORE DR
Add			APOPKA FL 32712
X Remove			
2) X Change	P	MELODY BOSTIC	1735 36TH ST
X Add			ORLANDO FL 32839
Remove 3) Change			<u> </u>
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			<del>-</del>
Add			
Remove			
6) Change			
Add			
Remove			

	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)
TO WHOM IT	MAY CONCERN I MELODY BOSTIC WILL NEED TO CHANGE AND REMOVE MY REGISTERED
AGENT ADDR	ESS AND THE MAILING ADDRESS WHICH IS 1406 GLENMORE DR APOPKA FL 32712.
WILL NEED I	BOTH THE MAILING AND REGISTERED AGENT ADDRESS AS 1735 36TH ST. ORLANDO FL
32839. THIS IS	THE PRINCIPAL ADDRESS AS WELL. I DID'NT KNOW THAT MY HOME ADDRESS WOULD BE
SEEN ON HER	E I THOUGHT IT WAS FOR IN-HOUSE USE ONLY. SO I WOULD DEEPLY APPRECIATE IF
THIS MATTER	BE HANDLED ASAP. FOR SAFETY PURPOSES.
provisions	tnent provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)
N/A	
,	

AUGUST 25, 2020	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
AUGUST 25,2020	
Effective date if applicable:	
(no more than 90 days after ame	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory for document's effective date on the Department of State's records.	iling requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	rs without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
■ The amendment(s) was/were approved by the shareholders through voting groumust be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by ONE	
(voting group)	<del></del>
1	
SEPTEMBER 9, 2020	
Dated	
n/n	$\supset \mathcal{M}'$
Signature 7/10. Thelevely	DOMC
(By a director, president or other officer - if directors	or officers have not been
selected, by an incorporator – if in the hands of a reco	eiver, trustee, or other court
appointed fiduciary by that fiduciary)	
A A =	
IVI ET (NOY 180S) to	-
(Typed or printed name of person	signing)
( ) Para ( ) Para ( ) Para ( )	- <del>6 6 6 </del>
it and the	
TIESIGENT	
(Title of person signing)	