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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VENEAMERICA	CLEANNERS CORP	
	BER: P21000016154		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	CIRO A GUADAGNO		
		Name of Contact Person	n
	VENEAMERICA CLEANN	ERS CORP	
		Firm/ Company	
	3555 NE 5th ST APT 108	Tittle Company	
		Address	
	HOMESTEAD, FL 33033		
		City/ State and Zip Cod	e
	CIROGUADAGNO13@GM	AIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, please	se call: at (332-8481
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	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

ZENEAMERICA CLEANNERS CORP

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

VENEAMERICA CLEANNERS CORP					
(Name)	of Corporation as currently	filed with the Florida Dept. of State)			
P21000016154					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this F	Iorida Profit Corporation adopts the following	ng amendment(s) to		
A. If amending name, enter the new n	ame of the corporation:				
VENEAMERICA CLEANERS CORP			The new		
	Corp." "Inc." or "Co". A	ompany," or "incorporated" or the abbreviati professional corporation name must contai	on "Corp.,"		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		3555 NE 5TH ST			
		APT 108			
		HOMESTEAD, FL 33033			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3555 NE 5TH ST			
		APT 108			
		HOMESTEAD, FL 33033			
D. If amending the registered agent at new registered agent and/or the ne		ess in Florida, enter the name of the			
Name of New Registered Agent	DORIRMA ESTUPINAN				
	3555 NE 5TH ST APT 108		_		
	(Florida stre	et address)	_		
New Registered Office Address:	HOMESTEAD	. Florida			
			Code)		
New Registered Agent's Signature, if call thereby accept the appointment as registered.	hanging Registered Agent: tered agent. I am familiar w	ith and accept the obligations of the position.	21 JUN -		
	Dowant	1	- 00 - 00		
	Signature of New Re	gistered Agent, if changing	E.		

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)

Add

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: \underline{X} Change PΤ John Doe <u>V</u> X Remove Mike Jones \underline{X} Add \underline{SV} Sally Smith Type of Action Title **Name** <u>Address</u> (Check One) PT DORIRMA ESTUPINAN 3555 NE 5TH ST 1) X Change APT 108 ____ Add HOMESTEAD, FL 33033 __ Remove VPCIRO A GUADAGNO 3555 NE 5TH ST __ Change APT 108 ____ Add HOMESTEAD, FL 33033 __ Remove 3) ____ Change ___ Add ___ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ___ Add _ Remove 6) ____ Change

	ets, if necessary).	(Be specific)			
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The date of each amendment(s) adate this document was signed.	loption:, if other than the
-	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	pted by the shareholders. The number of votes cast for the amendment(s) Tricient for approval.
☐ The amendment(s) was/were ap	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	or the amendment(s) was/were sufficient for approval
by	••
,	(voting group)
05/18/202 Dated	
Signature	& Dandostat
selecte	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court and induciary)
	DORIRMA ESTUPINAN
	(Typed or printed name of person signing)
	Т
	(Title of person signing)

Secretary of the second