## P21000030813

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: SMELL OF HOU	ISE CLEAN INC	
	MBER: P21000030813		
The enclosed Article	es of Amendment and fee are s	ubmitted for filing.	
Please return all cor	respondence concerning this m	atter to the following:	
	RAFAEL SILVA		
		Name of Contact Perso	<u></u>
	SMELL OF HOUSE CLEAR		
		Firm/ Company	
	707 SE 5TH STREET	• •	
	•	Address	
	CAPE CORAL, FL, 33990		
	- · · · · · · · · · · · · · · · · · · ·	City/ State and Zip Coo	le
	grbookkeeping15@gmail.co	m	
	E-mail address: (to be u	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call;	
RAFAEL SILVA		at (	324-7467
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐SS2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.O	illing Address lendment Section rision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation

FILED

2022 APR 20 AM 8: 19

SMELL OF HOUSE CLEAN INC	SECKL. FUL STATE
	tily filed with the Florida Dept. of State) 10.33EC. FL
21000030813	
(Document Number	of Corporation (if known)
tursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
OUTHWEST SERVICES INC	T
ame 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.	A professional corporation name must contain the word
Enter new principal office address, if applicable:	same
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<del>-</del>
Tree No. 10	
<ul> <li>If amending the registered agent and/or registered office address new registered agent and/or the new registered office address</li> </ul>	dress in Florida, enter the name of the
Name of New Registered Agent	
(Florida s:	treet address)
(Florida si  New Registered Office Address:	(City)  Treet address)  Florida  (City)  (City)

☐ 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<del></del>		
Add			
Кетточе			
2) Change			
Add			
Remove 3) Change		· 	
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

AND THE SERVICES: HANDYMAN AND CLEANING SERVICES AND ANY OTHE RELATED			
	DDING NEW SERVICES: HANDYMAN AND CLEANING SERVICES AND ANY OTHE RELATED BUSINESS		
	·		
	· · · · · · · · · · · · · · · · · · ·		
·			
<del></del>			
<del></del>			
<u></u>			
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
Providence of the properties of an end of the second of th			
(if not applicable, indicate N/A)			

.

The date of each amendment(s date this document was signed.	) adoption:	, if other than the
-	3/05/2022	
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder actio	on and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	)
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statemed or each voting group entitled to vote separately on the amendment(s):	n!
"The number of votes ca	st for the amendment(s) was/were sufficient for appearable	
by RAFAEL SILVA	"	
	(voting group)	
03/05/20. Dated	22	
Signature		
SCICC	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other count inted fiduciary by that fiduciary)	<del></del>
	RAFAEL SILVA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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