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		J. HORNE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Immacu	late	Janitoria	1 Salutions	Cosp
DOCUMENT NUMBER:	P2100)०० <u>५</u> ६	(180		
The enclosed Articles of Amendm	ent and fee are sub	omitted for	filing.		
Please return all correspondence co	oncerning this mat	ter to the f	ollowing:		
		Y GINE Name o	+ Carré	alero	
	11, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		n/ Company	<i>p</i>	
	11575	City Ha		Re Suite 19	<u>v.2</u>
<u></u>	iramar 1	City/ Sta	330スケ ate and Zip Code	,,,,,	
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For further information concerning					
Vanet Carralero Name of Contact P	cison		at (786 Area Cod) <u>786 - 7</u> le & Daytime Teleph	878 one Number
Enclosed is a check for the followi					
S35 Filing Fee S43. Certi	75 Filing Fee & ficate of Status	Certifi	5 Filing Fee & ed Copy onal copy is ed)	S52.50 Filing Fe Certificate of Sta Certified Copy (Additional Copy is enclosed)	tus
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassec, FL	tion porations		Division The Ce	Address ment Section n of Corporations entre of Tallahassec l. Monroe Street, S	

Tallahassee, FL 32303

Articles of Amendment

	to Articles of Inc	orporation	13	Ø
lan di india	of	20220	C: - Mi 15 ĴĴ	
mmaculate lanifolical	Solutions /	(); ().	001 63	- 35
_	_	v filed with the Adrid	a/Dept. of State)	
<u> </u>	1210000 "	18150	· · · · · · · · · · · · · · · · · · ·	
(Do	cument Number of	Corporation (if known	1)	
Pursuant to the provisions of section 607,1006, Flo its Articles of Incorporation:	orida Statutes, this I	Florida Profit Corpora	tion adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of th	e corporation:			
	NIA			The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	Inc," or "Co". A	company," or "incorpo professional corpora	rated" or the abbi tion_name_must	eviation "Corp.," contain the word
B. Enter new principal office address, if applica		11575 (mit yel;	Kromenaele
Principal office address <u>MUST BE A STREET A</u>	ADDRESS)	Sinte 16	,	
		Milamar	FL 330	25
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(<u>BOX</u>)	11575 (5)	- Hall Con	ne nude.
		Soute 167.	•	
		Milliamon	IL 330	125
If amending the registered agent and/or registered agent and/or the new register			he name of the	
Name of New Registered Agent		· Carra lero		
	11575 6	y Yall flymani	1 4 02	······································
	(Florida stř	eet address)		-
New Registered Office Address:	Milingar	(City)	, Florida	<u> </u>
		(City)		(Zip Code)
New Registered Agent's Signature, if changing				
hereby accept the appointment as registered age	nt. – Lam familiar v	with and accept the obl	igations of the po	sition.
Jak'				
	スピンへ Signature of New Ro	egistered Agent, if chai	nging	

Check if applicable

 \square The amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (c), 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	PT John Doc	
X Remove	V Mike Jones	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	Resident Yadita Gonzalez	1355 W. Oheehobee Ad
Add Remove 2) Change Add	P Yanet Carratero	11575 GL; hall frommade # 162 Missner: EL 33025
Remove 3) Change		
Add Remove 4) Change Add		
Remove 5)ChangeAdd		
Remove 6) Change Add Remove		

	cessary). (Be sp	есуіс)			
					
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an amendment provides fo	or an exchange, r	<u>eclassification, or c</u>	ancellation of issued	i snares,	
provisions for implementing	g the amendment	eclassification, or o	ancellation of issued the amendment its	<u>r snares,</u> e <u>lf:</u>	
an amendment provides for implementing (if not applicable, indica	g the amendment	t if not contained in	ancellation of issued the amendment its	elf:	
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f an amendment provides for implementing (if not applicable, indica	g the amendment	eclassification, or o	the amendment its	r snares,	

The date of each amendment(s) adoption: $9/28/22$, if other t date this document was signed.	nan the
a/20122	
(no more than 90 days after amendment file date)	,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	