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SECRETARY OF STATE

SECRETARY OF STAT

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: EMPORIUM CAR	PET CLEANING INC.		
DOCUMENT NUMB	ER: <u>P21000095569</u>			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	ALRREMI JIMENEZ			
-		Name of Contact Person	n	
	EMPORIUM CARPET CLE	ANING INC		
-	EM ORIGINI CHRI ET CEE.	Firm/ Company		
	2131 NE 180TH STREET			
-	Address			
	N. MIAMI BEACH, FL 33162			
-		City/ State and Zip Cod	e	
-	alr8626@hotmail.com F-mail address: (to be us	ed for future annual report	notification)	
	e man address. (to be as	ca for fatare annual report	nottheation)	
For further information	concerning this matter, pleas	e call:		
	concorning and matter, pread	o carr.		
ALRREMI JIMENE		at (786) 222-6939	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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		SECOULTY IN
EMPORIUM CARPET CLEANING INC.		SECRETARY OF ST. Florida Dept. of State) LAHASSEE, FLE
(Name of Corpor	ration as currently filed with the	Florida Dept. of State)
P21000095569		
(Do	ocument Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Flo ts Articles of Incorporation:	orida Statutes, this Florida Profit Co	Corporation adopts the following amendment(s
A. If amending name, enter the new name of th	e corporation:	
		The new
name must he distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I. "chartered," "professional association," or the ab	^l nc," or "Co". A professional co	ncorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>		
		-
	-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
). If amending the registered agent and/or reginew registered agent and/or the new register		enter the name of the
Name of New Registered Agent		
		,
	(Florida street address)	
New Registered Office Address:		. Florida
wew Registered Office Address.	(City)	, riorida (Zip Code)
		·
ew Registered Agent's Signature, if changing I	Registered Agent:	
hereby accept the appointment as registered agen	it. I am familiar with and accept ti	he obligations of the position.
Si	ignature 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.

<u>X</u> 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ALYERSON D. JIMENEZ	2131 NE 180TH STREET
<u>x</u> Add			N. MIAMI BEACH, FL 33162
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
 -	
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) add	ontion: 11/15/2021	, if other than the
date this document was signed.		, if other than the
nee	2021	
Effective date <u>if applicable</u> : 11/15	(no more than 90 davs after amendment file d	atal
	(no more than 20 days after amenament fire a	216)
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filing requiren artment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the icient for approval.	amendment(s)
☐ The amendment(s) was/were appromust be separately provided for each	oved by the shareholders through voting groups. The followich voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
selected,	retor, president or other officer – if directors or officers haby an incorporator – if in the hands of a receiver, trustee. If fiduciary by that fiduciary)	ve not been or other court
	LRREMI JIMENEZ	
	(Typed or printed name of person signing)	
<u>P</u>	RESIDENT	
	(Title of person signing)	