P22000024614

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PICK-UP WAIT MAIL					
(Business Entity Name)					
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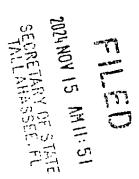




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10/07/24--01003--004 **25.00

11/22/24--01013--008 **10.00



COVER LETTER

TO: Amendment Section Division of Corporations hamy cleaning Services co NAME OF CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Services City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of
Shamu cleaning Services como
(Name of Corporation as currently filed with the Florida Dept. of State)
P22000024614
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Santana Glasse Shamy Cleaning Services Corf The new name must be distinguishable and contain the word "corporation," "company," or "neorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent
New Registered Office Address: (Florida street address) (Florida street address) (City) (City) (City)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			<u>у 25</u>
Add			SECRET TALL
Remove			
4) Change			77 Z
Add			
Remove			775 07
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary). (Be specific)	
the state of an engalation of issued the	ares
an amendment provides for an exchange, reclassification, or cancellation of issued share rovisions for implementing the amendment if not contained in the amendment itself:	<u>u c.s.</u>
(if not applicable, indicate N/A)	
(if that approximately triangles are a	
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	SECTION STATE

The date of each amendment(s) adoption:	11-5-24		, if other than the
late this document was signed.			
Effective date <u>if applicable</u> :	'- 5 - 24 (no more than 90 days after o	unendment file date)	
Note: If the date inserted in this block does is document's effective date on the Department of	not meet the applicable statutor		
Adoption of Amendment(s) (Cl	HECK ONE)		
The amendment(s) was/were adopted by the action was not required.	: incorporators, or board of dire	ctors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of approval.	votes east for the amende	nent(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he sharcholders through voting g g group entitled to vote separat	groups. The following steely on the amendment(s):	atement
"The number of votes east for the ame	endment(s) was/were sufficient	for approval	
by(ve	oting group)	"	
selected, by an in-	esident or other officer – if direct corporator – if in the hands of a ry by that fiduciary) Hirta VA (Typed or printed name of periods)	receiver, trustee, or other	Deen reourt SECRETAR
	(Title of person signing)		Y OF ST