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N/C Amen

A. RAMSEY FEB - 9 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: PROFESSIONAL	SERVICE CLEANING IN	C	
DOCUMENT NUMBE				
The enclosed Articles of	f Amendment and fee are st	ibmitted for filing.		
Please return all corresp	ondence concerning this ma	atter to the following:		
		SIMON A RAMIREZ		
		Name of Contact Person	1	
_		Firm/ Company		
		60 NE 14 STREET APT 20	7	
_		Address		
_		MIAMI FL 33132		
		City/ State and Zip Code	2	
		simonandresr94@gmail.c	com	
_	E-mail address: (to be us	sed for future annual report	notification)	
For further information o	concerning this matter, plea	se call:		
simon a ramirez		at (⁷⁸⁶	239-1490	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	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)	
Mailing Address		Street Address		
	Iment Section of Corporations	Amendment Section		
	ox 6327	Division of Corporations The Centre of Tallahassee		
	assee, FL 32314		J. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILEU

PROFESSIONAL SERVICE CLEANING INC

2122	Nov	14	PM 12	2.1
			1 1 1 1/	· • 1

(Name of Corp.	oration as currently	filed with the Florida Dept	of State)
MASTER I	PRO CLEANING A	ND RESTORATION INC	30: - 11:
(D	Ocument Number of	Corporation (if known)	
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	lorida Statutes, this F	Florida Profit Corporation ad	opts the following amend
A. If amending name, enter the new name of t	the corporation:		
MASTER PRO C	LEANING AND RE	STORATION INC	The 1
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the c	"Inc," or "Co". A		or the abbreviation "Corp
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET		NIA	
	,		
C. Enter con an illino address if an illinois			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)		
		774	
D. If amending the registered agent and/or reg new registered agent and/or the new registered.		ess in Florida, enter the nam	e of the
new registered agent and/or the new registe			
Name of New Registered Agent	No		
	(Florida stree	et address)	
New Registered Office Address:		 .	Florida(Zip Code)
	(4	City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age	rnt. I am familiar wi	ith and accept the obligations	of the position
	SIN		

Signature of New Registered Agent, if changing

Check if applicable

 \square 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, 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; C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as 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)	<u>Title</u>	Name	,)	Address
1) Change		-	NA	
Add				
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary). (Be s	specific)
	NIA
	NIII -
· · · · · · · · · · · · · · · · · · ·	
	
f an amendment provides for an exchange :	reclassification or cancellation of issued shares
f an amendment provides for an exchange, provisions for implementing the amendmen	reclassification, or cancellation of issued shares,
provisions for implementing the amendmen	t if not contained in the amendment itself:
f an amendment provides for an exchange, provisions for implementing the amendmen (if not applicable, indicate N/A)	t if not contained in the amendment itself:
provisions for implementing the amendmen	reclassification, or cancellation of issued shares, it if not contained in the amendment itself:
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provisions for implementing the amendmen	t if not contained in the amendment itself:

• 1	11/09/2022
The date of each a date this document	amendment(s) adoption:, if of was signed.
Effective date if a	11/09/2022
inective date <u>ir a</u>	(no more than 90 days after amendment file date)
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be 1 ve date on the Department of State's records.
Adoption of Amer	ndment(s) (<u>CHECK ONE</u>)
The amendment action was not r	t(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehol required.
	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
	t(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):
"The num	ber of votes cast for the amendment(s) was/were sufficient for approval
by	;"
ŷ 	(voting group)
1	11/09/2022 Dated
,	7ancu
S	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)
	SIMON A RAMIREZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)