P22000064527

(F	Requestor's Name)
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	Address)
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(4	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
9. 11.	
- Jack	

Office Use Only



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Name Change

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: SPADER CLEAN	ING SERVICES INC		_
DOCUMENT NUMB	P22000064527		<u> </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:		
	CAROLINI SPADER			
		Name of Contact Person	n	
		Firm/ Company		 -
	484 NW 165TH ST RD	, -		
•		Address		
	MIAMI FL 33169			
		City/ State and Zip Cod	· ·	SECRET SECRET
	contact@essentialhomeco.co	m		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
CAROLINI SPADER		at (<u>339</u>	545-6011	구절 등
Name o	of Contact Person	Area Co	de & Daytime Telephone N	umber
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amenc Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



June 26, 2024

CAROLINI SPADER 484 NW 165TH ST RD MIAMI, FL 33169

SUBJECT: SPADER CLEANING SERVICES INC

Ref. Number: P22000064527

We have received your document for SPADER CLEANING SERVICES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

& Co is not consider the corporate indicator word. You will need to add. Inc., Incoporation, Corp or Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 224A00014044

Diane Cushing Operations Manager A

Articles of Amendment to Articles of Incorporation of

SPADER OF FANING SERVICES INC.

(Name of Composition as augmently filed with the Florida Dant of State)	
(Name of Corporation as currently filed with the Florida Dept. of State) 222000064527	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following am s Articles of Incorporation:	nendment(s) to
. If amending name, enter the new name of the corporation: ESSENTIAL HOME & CO INC	e new
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the chartered," "professional association," or the abbreviation "P.A."	Corp.," e word
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
). If amending the registered agent and/or registered office address in Florida, enter the name of the	7 PM 3: 55
Name of New Registered Agent	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	 -
iew Registered Agent's Signature, if changing Registered Agent: 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)

Example:

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

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>		
Add			
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an amendment provides for an	<u>i exchange, re</u>	classification,	or cancellation	of issued share	<u>!S,</u>	
provisions for implementing the	: amendment	<u>if not containe</u>	d in the amendr	nent itself:		
	И)					
(if not applicable, indicate N						
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The date of each amendme	ent(s) adoption:		, if other than the
date this document was sign	ied.	•	
Effortive data if applicable	04/18/2024	•	
Effective date <u>if applicable</u>	(no mo	ore than 90 days after amend	ment file date)
	in this block does not meet in the Department of State's		ng requirements, this date will not be listed as the
Adoption of Amendment(s	s) (<u>CHECK O</u>	<u>(NE</u>)	
The amendment(s) was/v action was not required.	vere adopted by the incorpo	rators, or board of directors v	vithout shareholder action and shareholder
	were adopted by the shareho /were sufficient for approva	lders. The number of votes o	east for the amendment(s)
		olders through voting groups entitled to vote separately on	
"The number of vo	tes cast for the amendment(s) was/were sufficient for app	proval
by			
	(voting grou	ıp)	
	18/2024		
Dated			
Signature	audin	Spade	
	(By a director, president or	other officer – if directors or r – if in the hands of a receive fiduciary)	
	CAROLINI SPAD	ER	
	(Typed o	or printed name of person sig	ning)
	PRESIDENT		
	(Title of	person signing)	