P23000009046

	A STATE OF THE STA	
(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section
Division of Corporations

Q

NAME OF CORPO	ORATION: COUNTY WIDE	MAINTENANCE SERVI	CES INC						
	1BER: P23000009046		<u> </u>						
	es of Amendment and fee are su	bmitted for filing.							
Please return all corr	respondence concerning this ma	tter to the following:							
	Kenny X. Castillo								
		Name of Contact Pers	on						
	COUNTY WIDE MAINTEN	IANCE SERVICES INC							
		Firm/ Company							
	5338 NW 197TH TER								
		Address							
	MIAMI GARDENS, FL 330	55							
		City/ State and Zip Co	de						
	kxcastillo10@gmail.com								
	- -	sed for future annual repo	rt notification)						
		-							
For further informati	on concerning this matter, pleas	se call:							
Kenny X. Castillo		at (305	3435203						
Name	of Contact Person	at (305) 3435203 Area Code & Daytime Telephone Number							
Enclosed is a check	for the following amount made	payable to the Florida De	partment of State:						
\$35 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)						
	ailing Address	Street Address							
	nendment Section	Amendment Section							
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee							
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810							

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P23000009046		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:	NA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NX	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2023 FEB II ALL
D. If amending the registered agent and/or registered office adnessed new registered agent and/or the new registered office addressed.		11: 40
Name of New Registered Agent	1111	
New Registered Office Address:	street address) Florida	
New Registered Office Address.	(City), riorida_	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the pos	ition.
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> <u>Joh</u>	<u>n Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
_X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Kenneth X. Castillo	5338 NW 197 Ter.
Add			Miami Gardens, Florida 33055
Remove 2) Change	<u>P</u>	Kenny X. Castillo	5338 NW 197 Ter.
X Add			Miami Gardens, Florida 33055
Remove 3) Change			2020 FEE
Add			
Remove 4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

macii auamonui sneeis, y	ditional Articles, enter change(s) here: necessary). (Be specific)	
· <u> </u>		
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an amendment provides	s for an exchange, reclassification, or cancellation of is ing the amendment if not contained in the amendmen	ssued shares,
if not applicable, indi	cate N/A)	tt itseit.
	,	

	February 10, 2023	
The date of each amendmen		, if other than the
date this document was signed	1.	
	February 10, 2023	
Effective date <u>if applicable</u> :	/ 1 00 1 6 1 (01 1)	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	der action and shareholder
	re adopted by the shareholders. The number of votes cast for the amen ere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendment(s)	9) 123 F
"The number of vote	s cast for the amphidment(s) was/were sufficient for approval	
	,) / /	
by	<i>N</i> / <i>H</i>	
	(voting group)	
	' / /	
	2/12/- 22	
Dated	2110/2023	7 0
Signature _		
	By a director, president or other onicer - if directors or officers have no	t been
	elected, by an incorporator - if in the hands of a receiver, trustee, or oth	
	ppointed fiduciary by that fiduciary)	
	\sim	
	Lan X. (25/1/0	
	(Typed or printed name of person signing)	
	(1) pts diffinited illumit of person signing)	
	Y - Tasident	
	(Title of person signing)	
	/ I	