P330007-5438

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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPO	RATION: J & S Cleaning &	Restoration Inc.				
DOCUMENT NUM	P23000075438					
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Shelby A Giczkowski					
		Name of Contact Person	1			
	J & S Cleaning & Restoration Inc.					
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·			
	5215 NW Torino Lakes Circle					
	Address					
	Port Saint Lucie FL 34986					
		City/ State and Zip Cod	2			
	shelby.rose.giczkowski@gm	ail com				
		sed for future annual report	notification)			
For further information	on concerning this matter, pleas		239-9569			
Name	of Contact Person	Area Co	239-9569 de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Dep	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			Address			
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

J & S Cleaning & Restoration Inc.

(Name of Cornors	ation as currently filed with the Florid	a Dept. of State)
J & S Cleaning & Restoration Inc.		
(Doc	ument Number of Corporation (if known	n)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "lnc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abb	c," or "Co". A professional corpora	
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A)	ble: DDRESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)	
D. If amending the registered agent and/or regis new registered agent and/or the new registered		he name of the
Name of New Registered Agent		-
		· · · · · · · · · · · · · · · · · · ·
	(Floridu street address)	
New Registered Office Address:	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	tegistered Agent: t. I am familiar with and accept the obl	igations of the position.
Siz	gnature of New Registered Agent, if char	nging

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:

Remove

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	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Shelby A Giczkowski	5215 NW Torino Lakes Circle
X Add			Port Saint Lucie FL 34986
Remove			
2) Change	D	John A Osborne	5215 NW Torino Lakes Circle
X Add			Port Saint Lucie FL 34986
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			10 Table 10
6) Change			
Add			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
in You please add the EIN Number to this request. 93-4081518	
	
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	- ,
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	١
	 .
	<u> </u>

	:C - () () () -
The date of each amendment(s) adoption: date this document was signed.	_, if other than the
12/01/2023	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by'"	
(voting group)	
Dated	_
(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)	
Shelby A Giczkowski	۳۱ پ
(Typed or printed name of person signing)	
President	``
(Title of person signing)	