## Division of Corporations

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(((H24000082144 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ACCOUNTING PLUS PROFESSIONAL SERVICES, INC.

Account Number : 120230000089

Phone : (954)913-1520 Fax Number

: (954)301-0759

\*\*Enter the email address for this business entity to be used for futureannual report mailings. Enter only one email address please.\*\*

Ema	11	Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CAR WASH THREE BROTHER SINC

Certificate of Status	0
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Page Count	06
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Electronic Filing Menu Corporate Filing Menu

Help

TO: Amendment Sec Division of Corp						
NAME OF CORPO	RATION: CAR WASH THR	EE BROTHER S INC				
DOCUMENT NUM	BER: P24000006925					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	RENATA ALCANTARA		·			
		Name of Contact Perso	ņ			
	ACCOUNTING PLUS PROI	FESSIONAL SERVICES I	NC .			
		Firm/ Company	<del></del>	<del></del>		
	10850 MOORE DR					
		Address	*		•	
	PARKLAND, FL 33076					
		City/ State and Zip Cod	c	<del></del>		
	RENATAALC@HOTMAIL	.COM				
•	<del>-</del> -	sed for future annual report	notification)	_1 t	202	
•		•		79 T.3	<u> </u>	<del>कार ग</del> ुन्द
For further information	on concerning this matter, pleas	se call:		r	2024 FEB 29	ا تاسونی د
RENATA ALCANTA	ARA	954 	9131520	<u> </u>		i min
Name	of Contact Person	Area Co	de & Daytime Telephone Nu	mber 🗸 🗀	×	4 4
Envlosed is a check for	or the following amount made	payable to the Florida Dep	artment of State;		AH 10: 38	C
\$35 Filing Fee	☐\$43.75 Filling 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)	ر الله	38	
Am Div	iling Address endment Section ision of Corporations 3. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee	_		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation af

CAR WASH THREE BROTHER'S INC					
(Name	of Corporation us curre	ently filed with the Flor	ida Dept. of State)		
P2400006925				•	
•	(Document Number	er of Corporation (if know	<b>₩</b> n)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, t	his Florida Profit Corpo	ration adopts the following	g amendmen	ıt(s)-to
A. If amending name, enter the new p	ume of the corneration:	<u> </u>		•	
SARA CLEANING AND DECORATION	ON, INC		·		
name must he distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional associution,	Corp," "Inc," ar "Co". " or the abbreviation "P.	<ul> <li>A professional como:</li> </ul>	orated" or the abbreviation ration name must contain	_inc new on "Corp.," n the word	
B. Enter new principal office address. (Principal office address MUST BE A S	<u>if applicable:</u> STREET ADDRESS )	<del>-</del>			
•	·			<del></del>	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	OFFICE BOX)				
D. If amending the registered agent as new registered agent and/or the ne	<u>id/or registered office a</u> w registered office addr	<u>ddress in Florida, enter</u> ess:	the name of the		
Name of New Registered Agent	SARA MARIA PIGNA				
	22397 SW 66TH AVE	710		•	
•	(Florida	street address)			
New Revistered Office Address:	BOCA RATON		, Florida 33428		
New Registered Agent's Signiture, if c I hereby accept the appointment as regist	ered agens. I am familia Sana M.	(City)  Int:  If with and accept the ob  P. Recolds  Registered Agent, if cha	digations of the position	1024 FEB 29 AM 10:	
Check if applicable	organitie of New	e negisiwien Agent, y cho	nging	<u>⊁</u> ՛ր	

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 Doc 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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u> :	Sally Smith	
Type of Action (Check One)	Title	Name	Address
l) Change	P	GLENN J. C. PIGNATARO	22397 SW 66TH AVE 710
Add			BOCA RATON, FL 33428
X Remove		•	
2) X Change	P	SARA M. PIGNATARO RECALDE	22397 SW 66TH AVE 710
Add `			BOCA RATON, FL 33428
Remove Change			
Add			
Remove			
t) Change	- <del></del>		
Add			·
Remove			
5) Change		· ************************************	
Add			2024
Remove			
n Change			22
Add			
Remove			F 2 3g
			F≥ 2

LORIDA DEPARTMENT OF STATE	Page: 5 of 6	2024-03-01 03:15:15 GMT	19543010759	From; Renata Alc
		<b>.</b>		
		•	•	•
E. If amending or adding additional sheets, if neo	onal Articles, enter cha essary). (Be specific)	nge(s) here:		
			*** · *** * * * * * * * * * * * * * * *	<del></del>
		, , , , , , , , , , , , , , , , , , ,	·	· ·
4-7				
				<del></del>

F.	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)
_	

202k FEB 29 AM 10: 38

7

	nch amendment(a) ad ment was signed.	loption:, if other than the
Effective date	if applicable:	
		(no more than 90 days after amendment file date)
		ock does not meet the applicable statutory filing requirements, this date will not be listed as tipartment of State's records.
Adoption of A	tmendment(s)	(CHECK ONE)
	ment(s) was/were ador not required.	pled by the incorporators, or board of directors without shareholder action and shareholder
☐ The amenda by the shar	inent(s) was/were adop wholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s)  Micient for approval.
☐ The amenda must be sep	ment(s) was/were approarasely provided for e	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
. "The	number of votes cast f	or the amendment(s) was/were sufficient for approval
by S	ARA MARIA PIONA	TARO RECALDE  (vating group)
,		(voting group)
	02/29/2024 Dated	
	Signature	bara M. P. Recalde
	selected	ector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ad fiduciary by that fiduciary)
	5	SARA MARIA PIGNAȚARO RECALDE
	-	(Typed or printed maine of person signing)
	F	PRESIDENT
	· -	(Title of person signing)