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700432261777 07/31/24--01002--013 **35.00

COYER LETTER

Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: 1D \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of 1

10res Cleaning 3.	ervices Inc.
(Name of Corporation as curren	tily filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: A. If amending name, enter the new name of the corporation:	•
A. If Minerialing name, enter the new name of the corporation:	-
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 contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	2
	2
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addresses.	
Name of New Registered Agent Maria	T. Torres
Maria	1 T. Tiers
(Florida	street address)
New Registered Office Address: Lehigh	ACTES, Florida 33936
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familia	
Maria T. Signature of New	Tous
Signature of New	Registered Agent, if changing
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (1)	I) (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/airector line by the first letter of the office line.

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.

Example: <u>X</u> Change	PT John	<u>1.Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	DD	Maria T. Torres	1120 letsley 3t. Letig
Add Remove			HCres FL 33956
2) Change	<u> </u>	Chris May Ferrera	Lehigh Acres FL 33974
Kemove 3) Change			
Add			
4) Change			
Add			
5) Change Add		 	
Кетюче			
6) Change Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)				
Add				
·				
"				
				
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)				
				

•

The date of each amendment(s) adoption: _	07/3/24	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amen	dment file date)
	(no more man 50 auts after amera	meni jik udik)
Note: If the date inserted in this block does document's effective date on the Department of		ng requirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators, or board of directors	without shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		cast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voting		
"The number of votes cast for the am	endment(s) was/were sufficient for a	pproval
by		
(v	oting group)	
Dated 07/31/0	102U	
Signature Milava	J. Tous	
	esident or other officer – if directors of corporator – if in the hands of a recei	
	ry by that fiduciary)	ver, trustee, or other court
	(Typed or printed name of person si	zning)
(n)		•
$\frac{\mathcal{N}}{\mathcal{N}}$	aria T. Torre	<u> </u>
	(Title of person signing)	