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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MPERIAL CLEA	NING SOLUTIONS INC				
	BER: P24000040657					
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:				
	GLORIA I LONDONO GAI	LEGO				
		Name of Contact Person	1			
		Firm/ Company		_		
	4921 WEBBER ST					
		Address	· ·	_		
	SARASOTA, F1. 34232					
		City/ State and Zip Cod	c			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:		SECR TAL	2024 A	
GLORIA I LONDO	NO GALLEGO	941 at (977-1533 de & Daytime Telephone Numb	NA EAST	1 90	Pear
Name	of Contact Person	Area Co	de & Daytime Telephone Numb	per 👸 😤	9	! !
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:	CRETARY OF STAT	2024 AUG 16 PH12: 18	
■ \$35 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)	J. F.	8	
	ailing Address nendment Section		Address Iment Section			

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

IMPERIAL CLEANING SOLUTIONS INC

(Name of Corporation as currently	filed with the Florida Dept. of State)
P24000040657	
(Document Number of	Corporation (if known)
(Bocament Namber of	Corporation (11 known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	"lorida Profit Corporation 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 "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association." or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
· · · · · · · · · · · · · · · · · · ·	·
N. If a south of the section of a section of the se	and the state of t
D. If amending the registered agent and/or registered office address; new registered agent and/or the new registered office address;	
	SE
Name of New Registered Agent	
	AUG -
(Florida stre	ret address)
New Registered Office Address:	\mathcal{O}^{-1}
	(City) (City) (City)
	18 18
New Registered Agent's Signature, if changing Registered Agent:	, and the second se
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Chamber of Van D	wintered terms if alternative
Signature of New Ki	egistered Agent, if changing

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 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: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RAMON A COLON CRUZ	4921 WEBBER ST
Add _XXRemove			SARASOTA, FL 34232
2) Change Add			
Remove 3) Change Add			
4) Change Add			SECRETARY TAILAHAS
Remove 5) Change Add Remove			PH 12: 18 OF STATE SEE, FL
6) Change Add Remove			

	08/10/2024	
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	0/2024	
U8/1 Effective date if applicable:	0/2024	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	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	for the amendment(s) was/were sufficient for approval	
by	Ţ.	
-	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
action was not required.	•	
08/10/2024 Dated		
Signature (By a d		2024 AUG 16 PH SECRETARY OF
	GLORIA I LONDONO GALLEGO	
	(Typed or printed name of person signing)	
	PRESIDENT	18 ATE
	(Title of person signing)	