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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	ATION: <u>EMPIRE</u>	CLEANING	SERVICE ILIL	1000
DOCUMENT NUMB	ER: <u> <i>P</i>24000</u>	43313		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:	,	
-	Gladis Van	9as (je – Name of Contact Persón	Pina	
		Clus Daiga Firm/ Company		
	252 CHI	Firm/ Company NKAPIN Z	- N	
·		Address		
:	TALLAHAS	SEE F/ City/ State and Zip Code	32310	
		City/ State and Zip Code	!	
•	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
GIOLIMAR Name o	PINA VARGA	45 at (<u>850</u> Area Coo) <u>345 203 2</u> de & Daytime Telephone Nu	mber
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address		Address ment Section	
· · ·	endment Section sion of Corporations		n of Corporations	

STATES AND STATES

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

025 APR -7 PM 12: 0.

Articles of Amendment to Articles of Incorporation of

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1 1

EMPIRE CLEANING S. (Name of Corporation	ERYICE RR 1.	() (· Florida Dept. of State)
P2400	00433/3	
(Docume	ent Number of Corporation (if	known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	erporation adopts the following amendment(s
A. If amending name, enter the new name of the con	rporation:	
name must be distinguishable and contain the word "con" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional co	The new corporated" or the abbreviation "Corp.," or portain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, o	nter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- l hereby accept the appointment as registered agent.	i <mark>stered Agent:</mark> Lam familiar with and accept ti	ne obligations of the position.
4		
 	ture 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)

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.

Francis	e. unu sun,	amma, ar ta un mua.	
Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
!) Change Add	FINE	e Cladis Vargas de Piña	TAILAHASSEE
Remove 2) Change Add	T+++ (E0	E Glolimar Pina	FLORIDA 32310 252 CHIVEAPIN LIV
Remove 3) Change			TAH HASSEE I-L 32310
Add Remove 4) Change Add			
Remove			
Remove 6) Change Add			2025 APR
Remove			

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tach additional sheets, if necessary).	(Be specific)		
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			<u> </u>
			<u>.</u> .
		<u>_</u>	
			
an amendment provides for an exc	<u>iange, reclassification, or cancel</u>	lation of issued shares,	
- minimum for invalantanian the am-	ndment if not contained in the a	<u>imendment itself:</u>	
rovisions for implementing the am-			
(if not applicable, indicate N/A)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 w document's effective date on the Department of State's records.	fill 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 a action was not required.	nd 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 east for the amendment(s) was/were sufficient for approval	
by GADIS VOTEGES de Pina.	
(voting group)	
Dated 04/07/2025	
Dated 04/07/2025 Signature Oakis Varias	
(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)	
(Typed or printed name of person signing)	<u> </u>
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	

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