## P24000057972

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## · COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Participation in Cl	eaning Inc			
DOCUMENT NUM	P24000057972	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Dagmara Darias				
	Name of Contact Person				
	Participation in Cleaning Inc				
	Firm/ Company				
	160 sunset way				
		Address			
	Miami Springs Fl 33166				
		City/ State and Zip Code	2		
	mara55isa86@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Dagmara		at (	438-9966		
Name of Contact Person		Area Cou	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tatlahassee, F1, 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

2024 OCT -3 AH 10: 35 SECULIARY OF STATE

## Articles of Amendment to Articles of Incorporation

of Participation in Cleaning Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P24000057972 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) \_, Florida\_ New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position  $\frac{G}{117}$ 

Signature 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Neida Rabelo	160 sunset way
Add		-	Miami Spring Fl 33149
X Remove			
2) Change	P	Dagmara Darias	160 sunset way
X Add			Miami Spring Fl 33149
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change		_	
Add			
Remove			2024 SEC
6) Change			SECOLOR INCLES
Add			<u> </u>
Remove			
			ST D

amending or adding additional A attach additional sheets, if necessary	). (Be specific	)		
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an amendment provides for an exprovisions for implementing the ai (if not applicable, indicate N/A)				
				<u>_</u>
	<del></del>			·
		<del></del>		

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SECRETARY OF STATE
ALL WHASSEE, FL

The date of each amendment(s	) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment fil	e date)
<b>Note:</b> If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requi Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	idopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The for for each voting group entitled to vote separately on the ame	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	<u>,</u>	
•	(voting group)	
Dated	9/27/2024	
sele	director president or other officer – if directors or officers ted, by an incorporator – if in the hands of a receiver, truste inted fiduciary by that fiduciary)	
	Dagmara Darias	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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