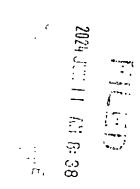


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## COVER LETTER

,

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CENTRAL FLOR	IDA INDUSTRI	AL SERVI	CES INC	
DOCUMENT NUM	4BER: P95000093177				
The enclosed Article	es of Amendment and fee are su	bmitted for filin	g.		
Please return all corr	respondence concerning this ma	tter to the follow	ving:		
	GREG LOFTIS				
	Name of Contact Person				
	CENTRAL FLORIDA INDUSTRIAL SERVICES INC				
	Firm/ Company				
	35530 GAETANO DR				
	Address				
	ZEPHYRHILLS, FL 33541				
		City/ State an	d Zip Code	<del></del>	
	GLOFTISTCFIS@AOL.COM				
	E-mail address: (to be us	sed for future and	nual report r	otification)	
For further informati	on concerning this matter, pleas		63	581-1129	
Name	of Contact Person	at (	Area Code	& Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Fl		•	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filir Certified Co (Additional c enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di <sup>,</sup> P.C	ailing Address hendment Section vision of Corporations D. Box 6327 llahassec. FL 32314		Division The Cer 2415 N.	ddress tent Section of Corporations atre of Tallahassee Monroe Street, Suite 810 see, FL 32303	

## Articles of Amendment to Articles of Incorporation of

CENTRAL FLORIDA INDUSTRAIL SERVICES INC

FILED

CENTRAL FLORIDA INDUSTRAIL SERVICES IN	4C		The land land
(Name of Corporati	ion as currently filed	with the Florida Dep	t. of State)
P95000093177			77 A.: 8:38
(Docur	ment Number of Corpo	oration (if known)	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Florida</i>	a Profit Corporation a	dopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:		
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A profe.	ny," or "incorporated" ssional corporation n	Thenew or the abbreviation "Corp.," ame_must_contain_the_word
B. Enter new principal office address, if applicable	a•		
(Principal office address MUST BE A STREET ADI			·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
			<del></del>
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in office address:	Florida, enter the nan	ne of the
Name of New Registered Agent		<u> </u>	
<del></del>	(Florida street addr	ess)	<del></del>
New Registered Office Address:			Clustida
New York Control of the Trade Control of the Contro	(City)	<del></del>	. Florida(Zin Code)
New Registered Agent's Signature, if changing Reg	istered Agent:		
hereby accept the appointment as registered agent.	I am familiar with and	l accept the obligations	s of the position.
Signa	iture of New Registere	d Agent, if changing	
Check if annlicable			

Check if applicable

 $\Box$  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)

Add

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 V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) **GREG LOFTIS** 35530 GAETANO DR 1) X Change ZEPHYRHILLS, FL 33541 \_\_\_\_ Add \_\_\_\_ Remove AMANDA LOFTIS 35530 GAETANO DR 2) \_\_\_\_ Change X\_\_\_Add ZEPHYRHILLS, FL 33541 Remove 3) Change \_\_\_\_ Add Remove 4) Change \_\_\_ Add Remove 5) \_\_\_\_ Change \_\_\_\_ Add Remove 6) \_\_\_\_ Change

	il sheets, if necessary).	(Be specific)			
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	t provides for an exci	iange, reclassificati	<u>on, or cancellatio</u>	n of issued shares,	
an amendment	aipiemenung me zine	nament it not conta	ained in the amen	idment itself:	
f an amendment provisions for in (if not applie	cable indicate N/4)				
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provisions for in (if not applic	cable, indicate N/A)				
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• . . .

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the autificient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/04/2024 Dated Signature	Westing Light of the officer – if directors or officers have	e not been
selecte	d, by an incorporator if in the hands of a receiver, trustee, o	
appoin	ted fiduciary by that fiduciary)	
	GREG LOFTIS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	