Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H240000560713)))



H240000560713ABCZ

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DORCEY LAW FIRM, PLC

Account Number : I20230000134

Phone : (239)418-0169

Fax Number : (239)418-0048

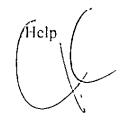
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email:	Address:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN SPALDING CARPET CLEANERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



From: Joshua Dorcey

Fax: 12394180048

To: Sunbiz etite account (Corpo Fax; (850) 617-6380

DocuSign Envelope ID: 16B21545-8288-4463-BF24-F084100B190B

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(((H24000056071 3)))

COVER LETTER

TO: Amendment Se- Division of Cor				
NAME OF CORPO	DRATION: SPALDING CAR	PET CLEANERS, INC.		
	1BER: P96000038807			_
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Charles P. Spalding			
		Name of Contact Perso	n	2
	Spalding Carpet Cleaners, In-	· •		# P
	Firm/ Company			
	27427 Elwood Drive			EB-9 ANII
		Address		— SS = 1
	Bonita Springs, FL 341355			2024 FEB -9 AM 10: 53 SELVE FARY OF STATE TALLAHASSEE, FL
	City/ State and Zip Code			
	spaldingcarpetcleaners@gmail.com			m W
	E-mail address: (to be us	sed for future annual repor	t notification)	
For further information	on concerning this matter, pleas	se call;		
Charles P. Spalding		239 at (463-6668	
Name	of Contact Person	Area Co	ode & Daytime Telephone Nu	mber
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment 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 Tallahassee, FL 32314		Amen Divisi The C	Address dment Section on of Corporations 'entre of Tallahassee N. Monroe Street, Suite 81	0

Tallahassee, FL 32303

From: Joshua Dorcey DocuSign Envelope ID: 16B21545-8288-4463-BF24-F084100B190B

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Fax: 12394180048

To, Sunbiz efile account (Corpo Fax. (850) 617-6380

Page: 4 of 7

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Articles of Amendment

to Articles of Incorporation

of

ING CARPET CLEANERS, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
038807	
(Document Number of Corporation (if known)	
t to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(les of Incorporation:	s) to
nending name, enter the new name of the corporation:	
Girm, 🖼	
ist be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "(fip.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain, the word "ed.," "professional association," or the abbreviation "P.A." r new principal office address, if applicable: al office address MUST BE A STREET ADDRESS)	T = m O
er new mailing address, if applicable: Hing address MAY BE A POST OFFICE BOX)	
nending the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip (.ode)	
vistered Agent's Signature, if changing Registered Agent: accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
r new principal office address, if applicable: al office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: lling address MAY BE A POST OFFICE BOX) tending the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	

Fax: 12394180048

To: Sunbiz etite account (Corpo Fax: (850) 617-6380

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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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u> T'1</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address S: 22
X Change	DP	Charles P. Spalding	Address 27427 Elwood Drive TR
Add			Bonita Springs, FL 3478511
Remove			SE SE
2) Change	D	Charles P. Spalding, III	2929 SE 8th Place 757 53
X Add			Cape Coral, FL 33919
Remove 3) Change	D	William W. Spalding	342 Prather Dr.
$\frac{X}{X}$ Add			Fort Myers, FL 33919
Remove			
4) Change			
Add			
Remove			
5) Change			-
Remove			
6) Change			
Add			
Remove			

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Attach additional sheets, if necessary). (Be specific)	
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	P . 1
	OF STATE
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	نگ ایسے ا
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

rom: Joshua Dorcey Fax: 12394180048 DocuSign Envelope ID: 16B21545-8288-4463-B	To: Sunbiz elile account (Corpo Fax: (850) 617-6380 F24-F084100B190B	Page: 7 of 7 02/09/2024 11:48 A ({(H2400000071 3}))
	ption:	, if other than
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 blo document's effective date on the Department	ck does not meet the applicable statutory filing require artment of State's records.	ments, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors without sh	archolder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes east for the	e amendment(s)
	oved by the shareholders through voting groups. The folioteh voting group entitled to vote separately on the amend	
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by		φ 2
	(voting group)	124.
4/8/2021 Dated	3	2024FEB-9 SEGNCTARY TALLAHAS
Dated	OocuSigned by:	SYON
Signature	Charles P. Spalding Jr.	
(By a dire	ctor, president or other officer if directors or officers h	ave not been
	by an incorporator—if in the hands of a receiver, trustee I fiduciary by that fiduciary)	, or other cour $\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}$

Charles P. Spalding

(Typed or printed name of person signing)

President

(Title of person signing)

the

the