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8/31/12 RW Amend SECRETARY OF STATE
TALLAHASSEE, FLORID

COVER LETTER

Division of Corporations
NAME OF CORPORATION: GORBY'S CLEANING CO. INC.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
TOQUANDA BACON Name of Contact Person
Firm/ Company
• •
3412 ST. COMPAD, ST Address
TAMPA E 33607 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TOQUAMPA NACOJ at (813) 503-053 P Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed) \$35 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

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

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation



12 AUG 30 PM 12: 36 GORBY'S CUTANING (Name of Corporation as currently filed with the Florida Dept. of State) (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: 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." 3412 ST. CONRADO B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: P.O. BOX 1566 (Mailing address MAY BE A POST OFFICE BOX) DUE WESS R 34451-1566 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 TAMPA , Florida F2 33607 (City) (Zip Code) New Registered Office Address:

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.

Signature of New Registered 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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	DPST		MUNIELLE L. HEATH	3805 N. Inolanthanolo
Add				Henranbo, FL 34442
Remove		,		
2) Change	_D_	_	STEVEN OLVER	4289 E. LOUISÍANA LA
Add				HERNAMON T34442
Remove				
3)Change	DRE	7	AUEXISZ. MULIAMS	3412 ST. CONPAD 55
Add				TAMPA, FZ 33607
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
. 6) Change	·			
6) Change Add		<u> </u>		
Remove				
KCHIOVC				

	nending or adding additional Articles, enter change(s) here: The additional sheets, if necessary). (Be specific)
	1.10
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lf an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	(if not applicable, indicate N/A)
	~/A
	~/A

w • • • •	1
he date of each amendment(s) adoptic	on: 8 25 2012
	8 25 2012
ffective date if applicable:	(no more than 90 days after amendment file date)
	. ()
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5	(voting group)
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated8	25/12
Signature	
(By a director selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
	(Typed or printed name of person signing)
4	Alexis Z Williams — DPS 7 (Title of person signing)
	Murille B State
	n 11. B Heath