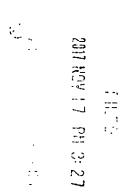
M1270H

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C. GOLDEN NOV 2 0 2017

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Sheriday AT Canditioning, The M12704 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Geral E. Sher; day
Name of Contact Person Sheridan Arr Coud, tim, No Twe Firm/ Company

650 NE 35) Street, Bay # D

Address

Foundable Beach, FL 33064

City/ State and Zip Code G sher; 4186 p ACL. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gerard E. Sheridand
Name of Contact Person at (<u>954</u>) <u>781 - 6618</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILEO

Sheridan Air Condition	ing . Ide	2017 HOV 1	7 PH 3: 2
(Name of Corporat	ion as currently filed with the Florida De	pt. of State)	
M 12704			
(Þocu	ment Number of Corporation (if known)	7,	
Pursuant to the provisions of section 607,1006, Floric its Articles of Incorporation;	la Statutes, this Florida Profit Corporation	adopts the following a	mendment(s) to
A. If amending name, enter the new name of the c	orporation:		
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	rd "corporation," "company," or "incorpo," "Inc," or "Co". A professional corpo e abbreviation "P.A."	porated" or the abbr	he new reviation stain the
B. Enter new principal office address, if applicable	e:		
(Principal office address MUST BE A STREET AD			
Î.		. <u></u>	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	O(X)		
)			
i l			
D. If any address to the state of the state	1 6 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.1	
D. If amending the registered agent and/or registered agent and/or the new registered	red office address in Florida, enter the na office address:	ame of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code	ei
New Registered Agent's Signature, if changing Re			
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligation	ons of the position.	
]]			
	nature of New Registered Agent, if changing		
	mare of the negmenturized, if changing	i	
Ĭ, Ì			
11			

If amending the Officers address of each Officer a (Attach additional sheets,	and/or D	irector being			lirector being removed and title, name, and
Please note the officer/dir			less.	er of the office title:	
					ustee: C = Chairman or Clerk; CEO = Chief
					nan one title, list the first letter of each office
held. President, Treasure			•	=	
					ST and Mike Jones is listed as the V. There is
					hould be noted as John Doe, PT as a Change.
Mike Jones, V as Remove,					
Example:		•	H		
X Change	<u>PT</u>	<u>John Doe</u>			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	me.		<u>Addres</u> s
1) Change	<u> 60</u>	_ D	21	Juis Rasku	1210 SE 104 Terr
Add			1		Deerfield Beach
Remove					Flarida 3344)
2) Change	<u> </u>);	lien H. Distler	1199 NW 643 Ave
_ X _ Add					Soca Roton
Remove					Florida 33432
3) Change					
Add			Ì		
Remove					
4) Change		_	<u>}</u>		
Add					
Remove					
5) Change		_	_		
Add			i		
Remove					
6) Change				1	
Add					

__ Remove

E. If amending or adding additional Articles	, s, er	iter change(s) here:
(Attach additional sheets, if necessary). (F	}e s	pecific)
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F. If an amendment provides for an exchang	<u>e</u> _	eclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ien 	if not contained in the amendment itself:
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•	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
-	
Effective date <u>if applicable</u> :	(no more)than 90 days after amendment file date)
	 of meet the applicable statutory filing requirements, this date will not be fisted as the
Adoption of Amendment(s) (CH	ECK ONE)
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	h shareholders. The number of votes cast for the amendment(s) pproval,
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval
by	
(vot	ng group)
☐ The amendment(s) was/were adopted by the laction was not required.	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	ncorporators without shareholder action and shareholder
Dated	<u>'h</u>
Dated 11/14/2015	I Sheridan
(By a director, presi selected, by an inco	dent or other officer – if directors or officers have not been receiver, trustee, or other court
appointed fiduciary	touthat fiduciary)
Gerard	ME. Sheridan
(Typed or printed name of person signing)
Vice	President
	(Title of person signing)