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COVER LETTER

Division of Corporations NAME OF CORPORATION: CLIVE G. NELSON PLUMRING INC.
DOCUMENT NUMBER: PO2000091665 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CLIVE G. NELSON

Name of Contact Person

CLIVE G. NELSON PLUMBING INC.

Firm/ Company

10218 S. W. 2B COURT

Address

MIRAMAR FLORIDA, 33025

City/ State and Zip Code NELSON PLUM BING @ CONCAST, NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CLIVE G. NELSON at (954) 394 5151

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: \$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee &

Certified Copy

enclosed)

(Additional copy is

Mailing Address

TO: Amendment Section

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

Certificate of Status

Street Address

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

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

to
Articles of Incorporation
of

CLIVE G. NELSON PL	imbing Inc.
^	filed with the Florida Dept. of State)
P0200091665	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this F_0 its Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
CLIVE G. NELSON PLUMBI	NG & SEPTIC INC. The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co" or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	A/A = = = :
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	A
(Florida stree	t address)
New Registered Office Address:	, Florida
	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
~/	gistered Agent, if changing
Signature of New Re	gistered 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 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>	<u>Name</u>	Address
1) Change		SHARON TERRY-NELS	0~
X Add			10218 S.W. 23 COWRT
Remove			10218 S.W. 23 COURT MIRAMAR, FL., 33025
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

lf amend Attach <i>ac</i>	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)	
		_
	1	
<u> </u>		
		_
provisi	nendment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)	
_	,	
	NA	

The date of each amendment(s) adoption:date this document was signed.	01.29.2019	, if other than the
Effective date if applicable:	N/A	
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this block does document's effective date on the Department o		guirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK (ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		r the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by	ding group)	
☐ The amendment(s) was/were adopted by the action was not required.		ion and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action a	nd shareholder
Dated 01, 29,	2019	
Dated 01, 29, 2	Meur	
selected, by an inc appointed fiduciar	ident or other officer – if directors or office orporator – if in the hands of a receiver, tru y by that fiduciary)	stee, or other court
C	INE G. NELSO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	