P10000059191

| (Req | uestor's Name) | |
|---------------------------|-----------------|-------------|
| (Add | ress) | |
| (Add | ress) | |
| (City | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Na | me) |
| (Doc | ument Number) | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
| | | |
| | | |
| | | |
| | | |
| L | · | |

Office Use Only



900264240949

09/19/14--01009--005 **95.6

14 SEP 19 PH 3: 13

9.26.14

COVER LETTER

TO: Amendment Section
Division of Corporations

| 2 | | | |
|--------------------------|---------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| | RATION: AQUAKLE | | ICE INC |
| DOCUMENT NUM | _{BER:} P1000008919 | · • | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | espondence concerning this ma | tter to the following: | |
| | WILLIAM WYAT | | |
| | | Name of Contact Person | 1 |
| | AQUAKLEER PO | OL SERVICE IN | VC |
| | | Firm/ Company | |
| | PO BOX 151332 | | |
| | | Address | |
| | CAPE CORAL, F | L 33915 | |
| | | City/ State and Zip Code | e |
| IE | SSICACANTU@C | OMCAST NET | |
| <u> </u> | | sed for future annual report | notification) |
| | E man address. (to be a | sea for fatare minual report | notification) |
| For further information | on concerning this matter, pleas | se call: | |
| WILLIAM W | YATT | at (239 | 887-5000 |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | urtment of State: |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | Street Address | |
| Am | endment Section | Amend | ment Section |
| Division of Corporations | | Division of Corporations | |
| |). Box 6327 lahassee, FL 32314 | | Building Executive Center Circle |
| ı aı | iaiia55CC, FL 32314 | 2001 E | XECULIVE CEILER CIFCIE |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



AQUAKLEER POOL SERVICE INC.

| 7 IGO7 INCELETY TO GE GENTY IGE 1170 ; | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| (Name of Corporation as currently filed with the Fl | orida Dept. of State) |
| P10000089191 | |
| (Document Number of Corporation (if | known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation: | Florida Profit Corporation adopts the following amendmen |
| A. If amending name, enter the new name of the corporation: | |
| | _The new |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I | Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 110 NW 2ND AVE |
| | CAPE CORAL, FL 33993 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | PO BOX 151332 |
| | CAPE CORAL, FL 33915 |
| D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: | ess in Florida, enter the name of the |
| Name of New Registered Agent WILLIAM WYAT | <u>T</u> |
| 110 NW 2ND A\ | /E |
| (Florida stre | ret address) |
| New Registered Office Address: CAPE CORAL | , Florida 33993 |
| (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Registered Agent. | gent, if changing |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each held. President, Treasurer, Director would be <math>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. Th 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 Ch. 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 | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | S | STEVEN MACKESY | 711 TARPON BAY ROAD |
| Add | | | SANIBEL, FL 33957 |
| Remove | | | |
| 2) Change | Т | STEVEN MACKESY | 711 TARPON BAY ROAD |
| Add | | | SANIBEL, FL 33957 |
| Remove | | | |
| 3) Change | VP | BILLY WYATT | |
| ✓ Add | | | 2300 SW 22ND ST |
| Remove | | | CAPE CORAL, FL 33991 |
| 4) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | <u></u> | | |
| Add | | | |
| Remove | | | |

| | | eets, if necessary). | (Be specif | (c) | | | |
|------------|------------------|----------------------------------------------------------|-------------------------------|---------------------------------|----------------------------|----------------------------------------|--|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | , | | |
| | | | | | | | |
| | | | | | | | |
| | | | · | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| an | n amendment pr | rovides for an exc | hange, recla endment if n | sification, or | cancellation o | f issued shares, ent itself: | |
| an | visions for impl | rovides for an exc lementing the amole, indicate N/A) | hange, recla endment if n | sification, or ot contained | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla: endment if n | ssification, or ot contained | cancellation o | <u>f issued shares,</u> ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla endment if n | sification, or ot contained | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla: endment if n | ssification, or ot contained | cancellation on the amendm | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla endment if n | sification, or ot contained | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla endment if n | ssification, or ot contained | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla endment if n | sification, or ot contained | cancellation o | f issued shares, ent itself: | |
| f an | visions for impl | lementing the am | hange, recla endment if n | ssification, or ot contained | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla endment if n | ssification, or | cancellation o | f issued shares, ent itself: | |
| <u>pro</u> | visions for impl | lementing the am | hange, recla | sification, or ot contained | cancellation o | f issued shares, ent itself: | |

| The date of each amendmen | t(s) adoption: 08/31/2014 | , if other ti |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| date this document was signed | i. | |
| Effective date if applicable: | 08/31/2014 | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. | |
| | ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s): | |
| "The number of vote | es cast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder | |
| Dated_08/ | 31/2014 | |
| Signature _ | WSTA | |
| 1) | By a director, president of other officer of directors or officers have not been | |
| | elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| | WILLIAM WYATT | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |