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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: SANIEL PLUMBIN	NG COMPANY		
DOCUMENT NUM	P14000026765			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	ASDIEL BRUNET CARCAS	ES		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person		
SANIBEL PLUMBING COMPANY				
		Firm/ Company		
	2244 PERIWINKI,E WAY SUITE 13			
		Address		
	SANIBEL, FL, 33957			
		City/ State and Zip Code	<u> </u>	
	GRBOOKKEEPING15@GM	AILCOM		
		ed for future annual report	notification)	
For further information	on concerning this matter, pleas		888-5070	
Name of Contact Person		Area Co) 888-5070 le & Daytime Telephone Number	
linelosed is a check for	or the following amount made p	ayable to the Florida Depa	artment 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SANIBEL	PULI	MRING	COME	PANY

(<u>Name</u>	of Corporation as curr	ently filed with the Florida Dep	ot. of State)
P14000026765			
	(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes,	this Florida Profit Corporation a	idopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation	<u>ı:</u>	
		_	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp, " "Inc, " or "Co"	". A professional corporation is	" or the abbreviation "Corp.,"
B. Enter new principal office address.	if applicable:		
(Principal office address <u>MUST BE A S</u>	STREET ADDRESS)		<u> 20</u>
			1
		<u></u>	
C. Enter new mailing address, if app			
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		2. 2
			(3)
D. If any adding the production of a section	ad/an assistant of FC as	address to Display and assess	of the
D. If amending the registered agent a new registered agent and/or the ne			ime of the
Name of New Registered Agent	G&R BOOKKEEPIN		
Mane ly New Regimerea Agent	4403 SE 16TH PL ST		
	(Floria	la street address)	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	CAPE CORAL		, Florida 33904
New Registerea Office Address		(City)	
		1	
New Registered Agent's Signature, if a I hereby accept the appointment as regis			un uCelea unuician
i nerchy accept the appointment as regis	terea ageni. Tam jamii	dar with thataccept the abugano.	ns of the position.
		A	
	Signature of Me	w Registered Agent, if changing	_
Check if applicable			
☐ The amendment(s) is/are being filed a	oursuant to s. 607,0120 ((11) (e), F.S.	

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.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e_Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PVPT	ARLEY GARCIA	1116 PALMETO AVE
Add			LEHIGH ACRES, FL, 33972
X Remove	PVPT	ASDIEL BRUNET CARCASES	928 SE 16TH ST
2) Change		<u></u>	CAPE CORAL, FL, 33990
X Remove	PVPT	LA PUA MANAGEMENT LLC	
X Add			2271 BRUNER LANE UNIT 6
Remove			FORT MYERS, FL, 33912
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)
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	100000 1000 1000 1000 1000 1000 1000 1
I an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	inginent if not contained in the unemanded reserv
	

09/29/2020	
The date of each amendment(s) adoption:	, if other that
date this document was signed.	
09/29/2020	
Effective date if applicable:	<u></u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed a
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	etion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendme by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
ASDIEL BRUNET CARCASES	
(voting group)	
09/296/2020 Dated	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
ASDIEL BRUNET CARCASES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

the

the