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EXAMINER



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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: American	Pump + Supply Company, INC.
DOCUMENT NUMBER: 5/6788	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this man	ter to the following:
STEWART I	Name of Contact Person
	Name of Contact Person
American Po	Firm/ Company
7580-A Wes	TTen. SE
Tallahassee	F1. 32304 City/ State and Zip Code
	City/ State and Zip Code
E-mail address: (to be use For further information concerning this matter, please	ed for future annual report notification)
STEWART THINAW Name of Contact Person	at (<u>850</u>) <u>576-1814</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee \$\text{Certificate of Status}\$\$ enclosed)	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

AMERICAN PLAND + SUPPLY COMP	any Ive	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
516188		
(Document Number of Corporation ((if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
AMERICAN BACKFLOW BOOKETS . 3	E Company	The new
American Backflow Products, Ename must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must c	obreviation contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tallahassee	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Florida 32304 P.O. Bax 37025 Tallahassee, FL. 32315	tij.
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		72
(Florida st	(reet address)	
New Registered Office Address:(City	, Florida, (Zip Code)	6 7
. 4 .	,	7 7 7
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.	TOTAL STATE OF
AI/ Z		Ú
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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		11
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
I) Change Add Remove		NO Changes		
2) Change Add Remove				
3) Change Add Remove				
4) Change Add Remove				<u></u>
5) Change Add Remove				
6) Change Add Remove				

uttach addition	nal sheets, if neces	sary). (Be s	pecific)					_
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<u>provisions for</u>	ent provides for a implementing the licable, indicate I	<u>ie amendmen</u>	reclassificat t if not cont	ion, or cance ained in the	llation of iss amendment	sued shar itself:	<u>-es,</u>	
N/A) i					-		
/								
		-	-					
·								
								

he date of each ameno	Iment(s) adoption: January 5th 2012 (no more than 90 days after amendment file date)
ffective date if applica	ible: January 5th 2012
	(no more than 90 days after amendment file date)
option of Amendme	nt(s) (<u>CHECK ONE</u>)
	as/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
	as/were approved by the shareholders through voting groups. The following statement rovided for each voting group entitled to vote separately on the amendment(s):
"The number of	votes cast for the amendment(s) was/were sufficient for approval
by	Jeff State of the
,	(voting group)
action was not require	as/were adopted by the incorporators without shareholder action and shareholder
Dated	1-6-12
Signat	By a director, president or other officer, if directors or officers have not been
	(By a director, president of other officer – if directors of officers have not been
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
•	
	M. STEWART INNAN (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)