## P05000054995

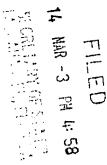
-	(Requestor's Name)
-	(Address)
-	(Address)
_	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
-	(Business Entity Name)
-	(Document Number)
c	Certified Copies Certificates of Status
M	Special Instructions to Filling Officer:  Con Sylva God and Con Sy





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Aven. 3/5/14



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: G & R PLUM DOCUMENT NUMBER: P05000054995	IBING INC	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
GIL KIMRON		
	Name of Contact Person	
G & R PLUMBING	INC	
	Firm/ Company	
2765 NW 84 TERR		
OOODED OUTVE	Address	
COOPER CITY, FL		····
•	City/ State and Zip Code	
GKIMRON@GMAIL.Co	MC	
E-mail address: (to be used	for future annual report no	otification)
	•	
For further information concerning this matter, please ca	all:	
GIL KIMRON	at (954	822-3614
Name of Contact Person		& Daytime Telephone Number
Enclosed is a check for the following amount made pays	able to the Florida Departi	ment of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	3\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division o Clifton Bi 2661 Exe	ent Section of Corporations

## Articles of Amendment to Articles of Incorporation of

G & R PLUMBING INC		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
<b>2</b> 05000054995		
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must co	breviation ontain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
(Frincipal Office address MOST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	2 11 1	73 <b>h</b>
		# MAR
D. If a construction of the latest terms at th		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		÷ 5
	street address)	Č
(rioriaa s	street adaress)	
New Registered Office Address: (Cit	, Florida	
(CII)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Ager	at:	
I hereby accept the appointment as registered agent. I am familian		
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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)  1) Change Add Remove	Title Name  RICK ABRAHAM  RICK ABRAHAM	Address  D1820 NW SU-87 LANDERHILL FL. 5335
2) Change Add Remove		
Change Add Remove	· · · · · · · · · · · · · · · · · · ·	
4) Change Add Remove		
Change Add Remove		
6) Change Add Remove	· · · · · · · · · · · · · · · · · · ·	

Page 2 of 4

ttach <i>additioi</i>	r adding additional and sheets, if necessar	y). (Be specifi	- (c)		
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<u>rovisions for</u>	ent provides for an emission implementing the ablicable, indicate N/A)	mendment if no	sification, or ca t contained in	incellation of issi the amendment i	ued shares, tself:
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The date of each amendment(s) ac	doption: FEBRUARY 17, 2014	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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		
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	2/17/14	
Signature 🚱	(A) MMRa	_
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	GIL KINRON	<del></del>
	(Typed or printed name of person signing)	
-	(Title of person signing)	_
	(The of person signing)	

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