P1500033173

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: amazing ain + Heat, INC DOCUMENT NUMBER: P1500022173
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Amazing Ring - Heat INC Firm/ Company LACO Daniels Ptiny - Address Fort Myers Fl 33912 (Tity/ State and Zip Code E-BSEE 123 P Act, Care E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PRIC SEE at (339) 671-6943 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) 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 Inco	rporation		May 11
amazine (an + t	Leat	INC.	Alas Constant
(Name of Cor	poration as currently	filed with the Plor	ida Dept. of Stat	e) 4/1/2 My
P150	150000	173		**************************************
(Document Number of O	Corporation (if know	wn)	C. K975
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corpo	ration adopts the	following amendment(s)
A. If amending name, enter the new name of	the corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc." or "C	lo". A professiona	"incorporated" el l corporation nan	or the abbreviation
B. Enter new principal office address, if app. (Principal office address MUST BE A STREE				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)				
D. If amending the registered agent and/or r new registered agent and/or the new regis		ss in Florida, enter	the name of the	
Name of New Registered Agent				
	(Florida stree	et address)		
New Registered Office Address:			, Florida	
	(0	City)		(Zip Code)
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a		ith and accept the or	bligations of the p	osition.
	Signature of New Reg	gistered Agent, if ch	nanging	

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 D	<u>oe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
l) Change	VP	<u> </u>	WILLIAM ROEJR	18243 FUCHSIA POL F+ MYERS, FL
Add Remove				F+ MyERS, FC 33967
2) Change				
Add				
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	<u></u>			
Add				
Remove				
6) Change				
Add				
Remove				

(Attach	ding or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
•	
	
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• • •	
lf an ar	endment provides for an exchange, reclassification, or cancellation of issued shares,
provis	ons for implementing the amendment if not contained in the amendment itself:
(if	not applicable, indicate N/A)

The date of each amendment(s) adoption: 4117/18	, if other than th
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after a	nendment file date)
tus more many subjection and	The state of the s
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of vo by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting grounds the separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	••
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharel action was not required.	nolder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	er action and shareholder
Dated	
Signature X	22
(By a director, president or other officer – if directo selected, by an incorporator – if in the hands of a re	
appointed fiduciary by that fiduciary)	ostroit tribitet, or orner eval.
ERIC SEE	
(Typed or printed name of person	
President.	
(Title of person signi	ng)