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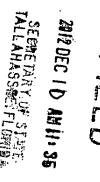
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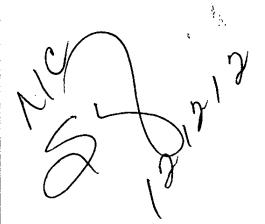




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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Tri-City Pool Service and Supply Company DOCUMENT NUMBER: 318102 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Garvin Name of Contact Person Tri-City Pool Service and Supply Company Firm/ Company 11501 Hampton Greens Drive Fort Myers, FL 33913 City/ State and Zip Code lorraineandjohn@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 561-7025 John Garvin Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status **Certified Copy Certified Copy** (Additional copy is (Additional Copy enclosed) is enclosed) Malling Address Street Address Amendment Section **Amendment Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

318102

Articles of Amendment

TALLAHARAY ANH. 36 **Articles of Incorporation** Tri-City Pool Service and Supply Company (Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

ndment(s) to

Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Flori</i>	da Profit Corporation add	opts the following amendme
A. If amending name, enter the new name of the	e corporation:		
J Garvin and Associates, TNC			The new
name must be distinguishable and contain the value "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the designation of the contains the value of the value of the contains the value of the val	word "corporation," ' orp," "inc," or "Co".	A professional corporat	rated" or the abbreviation
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)		
D. If amending the registered agent and/or registered agent and/or the new register		n Florida, enter the nam	e of the
Name of New Registered Agent			
	(Florida street ad	(dress)	
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agent		and accept the obligations	of the position.
Signature of	f 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	PI	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>SY</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u> s
1) Change			
Add			
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	· · · · · · · · · · · · · · · · · · ·		
Remove			
Keniove			
6) Change		_	
Add			
Remove			

	iditional Artic if necessary).	(Be specific)
		
		
	 	
		
	*	
		7
		
<u> </u>		
n amendment provide	s for an excha	ange, reclassification, or cancellation of issued shares,
<u>rovisions for implemen</u>	ting the amendicate N/A)	dment if not contained in the amendment itself:
(if not applicable, inc		

The date of each amendment(s)	adoption: November 29, 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
_	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated Nove	mber 29, 2012
Signature	Tolm Jani
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	John Garvin
	(Typed or printed name of person signing)
	President
	(Title of person signing)