# 331808

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

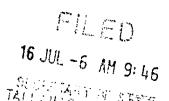
NAME OF CORPOR	ATION:Don	Harris Plumbing	Co., Inc.
DOCUMENT NUMB	er:3	<u> 31808                                    </u>	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
-	MAR	RKL. Wolli	tz
	\	Name of Contact Person	n
	Dor	n Harris Plumbing	Co., Inc.
	, _	Firm/ Company	
_	4029 BlA	NDING BI	VD
	ا میدم ا	Address	20010
	JACKSONVI	City/ State and Zip Cod	32210
M	E-mail address: (to be us	BRISOLUMB sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MARKL	Contact Person	at ( 904	de & Daytime Telephone Number
t Name of	Comact reison	Alta Co	ac & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable 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 cnclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
N. a		£44	A. 3.1

### 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** Articles of Incorporation of



Don Harris Plumbing Co., Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

nt(s) to

rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendary Articles of Incorporation:
If amending name, enter the new name of the corporation:
me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati 'orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain t rd "chartered," "professional association," or the abbreviation "P.A."
Enter new principal office address, if applicable:
rincipal office address <u>MUST BE A STREET ADDRESS</u> )
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(mailing uduress MAT BE A POST OFFICE BOX)
If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent MARK L. WOILITZ
4029 BLANDING BLVD
(Florida street address)
New Registered Office Address: A CKSONVILL , Florida 32210
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 D	<u>oe</u>		
X Remove	<u>v</u>	Mike J	<u>ones</u>		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	$\mathcal{P}$		NELSON ]	HARRIS	5 1320 FMALYN Dr.
Add					FLEMING ISLAND, FL
_X_ Remove					32003
2) Change	P	_	MARKL. W.	ollitz	9323 Alma ST LACKSONVILLE, FL 32220
• •			•	_	JACKSONVIIIE, 12 3222
Remove 3) Change	<u>νρ</u> εεςς (	<u>-</u> 0 1 1 1	Kim Butta	21	302 Tuetle Dove Dr.
Add		-7			Orange park, 7/32073
Kemove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					***************************************
Remove					

	ng or adding additional A ditional sheets, if necessary	). (Be specific)	gets) nere.		
				<del></del>	<del> </del>
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. ,	The state of the s				
				•	
f an amen	ndment provides for an ex	change, reclassific	ation, or cancellat	ion of issued shares,	
provisions	s for implementing the an	nendment if not co	ntained in the ame	endment itself:	
(if not	t applicable, indicate N/A)				
				u	

The description of the description (1-1-70/10)	io a a a
The date of each amendment(s) adoption:  date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> 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.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	rt
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	