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(Requ	estor's Name)	
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(City/s	State/Zip/Phone	e #)
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2018 OCT -S AM 7: 27 SECRETARY OF STATE

R. WHITE 0CT 1 5 2018

COVER LETTER

TO: Amendment Section
Division of Corporations (*)

NAME OF CORP	ORATION: Suntrol, Inc			
DOCUMENT NU	MBER:			
The enclosed Artic	les of Amendment and fee are s	submitted for filing.		
Please return all co	rrespondence concerning this m	atter to the following:		
	Susan M Murphy			
		Name of Contact Perso	n	
	Suntrol, Inc			
		Firm/ Company		
	1011 S Tamiami Trail			
		Address		
	Nokomis, FL 34275	71000		
		Cityl State and Zin Co.	<u> </u>	
		City/ State and Zip Cod	e e	
Sun	ntrolco@gmail.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informat	tion concerning this matter, plea	se call:		
Susan M. Murphy		941	. 485-0010	
Name of Contact Person		at (941		
			de & 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 &	□\$43.75 Filing Fee &	20 50 50 PW P	
	Certificate of Status	Certified Copy	\$52.50 Filing Fee Certificate of Status	
		(Additional copy is	Certified Copy	
		enclosed)	(Additional Copy	
			is enclosed)	
<u>M</u>	ailing Address	Street.	Address	
Amendment Section		Amendment Section		
	ivision of Corporations	Division of Corporations		
	O. Box 6327	Clifton Building		
Tallahassoe, FL 32314		2661 Executive Center Circle		

Tailahassee, FL 32301

Articles of Amendment

FILED

Articles of Incorporation of

2018 OCT -5 AM 7: 26

Suntrol,Inc		SECRETARY OF STATE
	of Corporation as currently	filled with the Florida Dept. of State)
598189		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new o	ame of the corporation:	
name must be distinguishable and coi "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	nation "Corp," "Inc," or "(The new not company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address	if applicable	
(Principal office address MUST BE A S	STREET ADDRESS)	
C. Enter new mailing address, if appl	icable:	
(Mailing address MAY BE A POST	OFFICE BOX)	
D. If amending the registered event as		
 If amending the registered agent are new registered agent and/or the ne 	Wor registered office address:	ss in Florida, enter the name of the
	Susan M Murphy	
Name of New Registered Agent		
	1011 S Tamiami Tr	
	(Florida stree	address)
New Registered Office Address:	Nokomis	34275
	(0	, Florida
	·	(map county
ew Registered Agent's Signature, if c	banging Registered Agent:	
hereby accept the appointment as regist	ered agent. I am familiar wi	th and accept the obligations of the position.
		- 0 1
•	~ 1	Muz
	Signature of New Res	gistered Agent of 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	ST	Susan M Murphy	1011 S Tamiami Tr
X Add			Nokomis, FL 34275
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
_			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	sheets, if necessary). (Be spec	tific)		
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(if not applicable, indicate N/A)	<u>uplementing the amendment if</u>	not contained in the	amendment itself:	res,
	able, indicate N/A)			
				

October 2, 2018O	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
October 2, 2018	
Effective date if applicable:	
(no more than 90 day	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory 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 numby the shareholders was/were sufficient for approval.	ber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote s	
"The number of votes cast for the amendment(s) was/were suff	ficient for approval
by	,"
by	
☐ The amendment(s) was/were adopted by the board of directors without action was not required.	
The amendment(s) was/were adopted by the incorporators without si action was not required.	hareholder action and shareholder
October 2, 2018 Dated	
Signature	
(By a director, president or other officer - i	f directors or officers have not been
selected, by an incorporator - if in the hand	
appointed fiduciary by that fiduciary)	
Thomas J Krause Sr.	Tono PROUSES
(Typed or printed name	of person signing)
PRES	
(Title of per	son signing)