652903

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JUN 2 0 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LOC Pump & Equ	ipment Company Of Florid	a Inc
DOCUMENT NUMB	652003		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
,	Charles Lowell		
-	<u> </u>	Name of Contact Persor	}
]	Loc Pump & Equipment Con	ipany Of Florida Inc	
-	 	Firm/ Company	
	7 West High Point Road		
-		Address	
:	Stuart, Fl 34996		
•		City/ State and Zip Code	2
rfrede	rickepa@gmail.com		
	= -	sed for future annual report	notification)
	·	•	,
For further information	concerning this matter, pleas	se call:	
Robert Frederick		at (615-4005
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depo	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$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 Tallabassee, EL 32314		Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LOC Pump & Equipment Company Of Florida Inc

(Name o	f Corporation as current	ly filed with the Florida Dept. of Stat-	<u>e</u>)		
652903					
	(Document Number of	f Corporation (if known)			
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the	followin	ig amend	ment(s)
A. If amending name, enter the new na	me of the corporation:				
N/A				The n	<i>e</i> w.
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," or	'Co". A professional corporation nun		 bbrevian	ion
3. Enter new principal office address, i Principal office address <u>MUST BE</u> A ST		N/A			_
rmcipul office address <u>most be A.S.</u>	(KEET ADDRESS)				_
Enter new mailing address, if applie (Mailing address MAY BE A POST (N/A	_		_
			Ţ ·.	\	-
			<u> </u>	-	
				<u> </u>	
 If amending the registered agent an new registered agent and/or the new 				Ü.	
	N/A	<u> </u>	- ,		1
Name of New Registered Avent				- , ,;	
	(Florida et	reet address)	<u></u> :	- (3)	
N. D. C. LOW. ALL	(i manual)				
New Registered Office Address:		, Florida (City)		(Zip Code)	
			i any	Cially	
N. Davida da antonio					
New Registered Agent's Signature, if che hereby accept the appointment as registed	ianging Registered Agent ered agent. I am familiar	<u>::</u> with and accept the obligations of the p	osition.		
		, , , ,			
	Ciamata and Allan	Revistered Avent if chanving		-	

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 Dog	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Charles Lowell III	7 West High Point Road
Add			Stuart FL 34996
Remove			
2) Change	P	Barbara Lowell	7 West High Point Road
Add			Stuart FL 34996
x Remove			
3) Change			
Add			
Remove			
4) Change	<u></u> :		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
•	
	
F. If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
* ''	transferred to Charles Lowell III. Charles Lowell III will be the 100% shareholde
	·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
06/12/17 Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	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(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"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 shareholder action was not required.	
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
06/12/17 Dated	
Signature	
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 court appointed fiduciary by that fiduciary)	
Charles Lowell III	
(Typed or printed name of person signing)	
President Mals, Januar	
(Title of person signing)	