F00898

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(Business Entity Name)			
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DAUE RALM PLUM BING INC. DOCUMENT NUMBER: F00898 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FARL SWEIGART
Name of Contact Person DAVE KALM ALUMBING INC. 8161 CANAVERAL BLUB. CAPE CANAUERAL FL. 32920
City/ State and Zip Code D KALM Phomoing & GMAIL - com
E-mail address (to be used for future annual report notification) For further information concerning this matter, please call-FARL SWEIGART at (321) 183-1122

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:

Mailing Address

☐ \$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

■\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

5\$52.50 Filing Fee

Certified Copy

is enclosed)

(Additional Copy

Certificate of Status

Articles of Amendment to Articles of Incorporation of

DAUE KALM PLUMBING, I	`N C ,
(Name of Corporation as currently fil	ed with the Florida Dept. of State)
F00898	
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
N/A	The nev
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A	. A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2019 JUL -
D. 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	
(Florida street d	uddress)
New Registered Office Address:	y , Florida
ıCii	y) (Zīp 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.
Signature of New Regi	stered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

6

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 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
51 Change		<u> </u>	
Add			
Remove			
6) Change		 	
Add			
Remove			

	sheets, if necessary). (B		-		
				 	
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provisions for it (if not applied	t provides for an exchangemplementing the amendricable, indicate N/A)	ment i <u>f not containe</u>	d in the amendme	nt itself:	HAOSS
	OCK TO				
EBRL	SWELLART	<u>pass</u>	115NT.	HOLDS 7	5 SHAR
SCOTT_	SWEIGART	V-PRSS	HOLD	s 25 S	HARES

The date of each amendment(s) adoption: 6-2[-19
Effective date if applicable: 5 - 21-19 (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 will not be listed document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"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.
Dated6-28-19
Signature Eal A Judyart Pres. (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)
EARL A SWEIGART
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)