

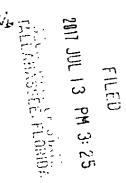
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C. GOLDEN JUL 1 8 2017

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Cox Fire Protecti	on, Inc.	
DOCUMENT NUM	BER: Charter # H20644		
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	Linda Cox		
		Name of Contact Pers	son
	Cox Fire Protection, Inc.		
		Firm/ Company	
	7910 Professional Place		
	· -	Address	
	Tampa, FL 33637		
		City/ State and Zip Co	ode
linda(	@coxfire.com		
	E-mail address: (to be us	sed for future annual repo	ort notification)
		,	,
For further information	n concerning this matter, pleas	se call:	
Linda Cox		813	980-3282, ext. 111
Name o	of Contact Person	at (	Code & Daytime Telephone Number
- Transie (	77 COMMENT CISON	Aica	code & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida De	partment of State:
■ \$35 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)
	ling Address	Stree	et Address
Amendment Section		Amendment Section	
	sion of Corporations	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2017 JUL 13 PM 3: 25 Cox Fire Protection, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) ... to the last of the last o TALLAHASSEE, FLORIDA H20644 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address) New Registered Office Address: (City) 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 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: <u>X</u> Change	<u>PT</u>	John Doe	
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	DP	Kevin S. Cox	20347 Gardenia Drive
Add			Land O'Lakes, FL 34638
Remove			
2) X Change	DVP	Ronald E. Cox	20347 Gardenia Drive
Add			Land O'Lakes, FL 34638
Remove			
3 ) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares
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provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
oth Ron and Kevin are remaining on as Directors. Kevin is now President, Ron is now Vice President. Stock
assignment is as follows:
nda J. Cox - 52% of shares (135 shares)
evin S. Cox - 20% of shares (52 shares)
onald E. Cox - 16% of shares (41 shares)
RAT - 12% of shares (32 shares)

The date of each amendment(s) adoption:  June 30, 2017  Late this document was signed.	if other than the
Effective date if applicable:	
(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) ( <u>CHECK ONE</u> )	
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 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.	
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)	<del></del>
Linda J. Cox	
(Typed or printed name of person signing)	
Linda Cox DCT	
(Title of person signing)	<del></del>