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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Bob Herrold's All Seasons Swimming Pools & Span				
DOCUMENT NU	мвек: <u>H24518</u>		<del></del>	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.		
Please return all co	orrespondence concerning thi	is matter to the following:		
		elora Downey		
	(Name	of Contact Person)		
<del></del>		easons Pools and Spas Inc	).	
	(Fii	rm/ Company)		
	322	2 N Dixie Frwy		
		(Address)		
		ma Beach, Fl 32168		
For further informa	City/ S ation concerning this matter,	tate and Zip Code) please call:		
	<b>,</b>	•		
Sharon Herrold		at ( <u>386</u> ) <u>427-95</u>		
(Name	e of Contact Person)	(Area Code & Daytim	e Telephone Number)	
Enclosed is a check	k for the following amount n	nade 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)	
<u>Mailing Ao</u> Amendmer		Street Address Amendment Section		
	Corporations	Division of Corporations	<b>S</b>	

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to

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	rticles of Incorpo	ration	2000 0070
	of		SECRETARY
Bob Herrold's All Seas	sons Swimming	Pools and Spas	S Inc. AG ARY OF CO.
Bob Herrold's All Seas	rrently filed with	the Florida Dept.	of State)
	H24518		
(Document N	lumber of Corporat	ion (if known)	
rsuant to the provisions of section 607.1 llowing amendment(s) to its Articles of Inc.		ites, this <i>Florida</i> I	Profit Corporation adopts
If amending name, enter the new name	e of the corporatio	<u>n:</u>	
/a			
he new name must be distinguishable incorporated" or the abbreviation "Corp. Co". A professional corporation no ssociation," or the abbreviation "P.A."	.," "Inc.," or Co.	," or the designa	tion "Corp," "Inc," or
Enter new principal office address, if a		322 North Dix	ie Frwy
rincipal office address <u>MUST BE A STR</u>	<u>EET ADDRESS</u> )	New Smyrna	Beach, Fl 32168
Enter new mailing address, if applical (Mailing address MAY BE A POST OF)		322 North Dixi	e Frwv
( <u> </u>	<del></del>		· · · · · · · · · · · · · · · · · · ·
		New Smyrna E	Beach, Fl 32168
. If amending the registered agent and/o	or registered office	address in Florid	a, enter the name of the
. If amending the registered agent and/o new registered agent and/or the new re			a, enter the name of the
			a, enter the name of the
new registered agent and/or the new re	egistered office ad		a, enter the name of the
	n/a		a, enter the name of the
new registered agent and/or the new re Name of New Registered Agent:	n/a	dress:	a, enter the name of the

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) <u>Title</u> **Name** Address Type of Action Robert F. Herrold 95 Cunningham Dr ☑ Add New Smyrna Beach, Fl 3214 Remove Brandon Kirby 162 Crystal Oaks Dr ☑ Add Deland, FI 32720 S Sharon Herrold 95 Cunningham Drive New Smyrna Beach, Fl 321 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A F. If 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) N/A

The date of each amendmen	t(s) adoption: <u>10/13/2008</u>
Effective date <u>if applicable</u> :	10/13/2008
meente date <u>mappioabie</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	10/14/08
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)