J04544

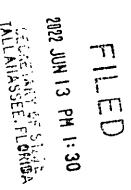
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Bel-Mar Plumbing Lox
DOCUMENT NUMBER: J04599
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
- Rickey L Hunter Ir
Bel-Mar Plumbing Inc
5901 S Loth St
Tampa, FL 33(01) City/ State and Zip Code
Customer Service a belmar plumbingine con E-mail address: (to be used for future annual report address)
For further information concerning this matter, please call:
Rickey L Hunter Jr a 813, 848-7866
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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

is enclosed)

Articles of Amendment to Articles of Incorporation

Bel-Mar Plonk	oing Inc
(Name of Corporation as currently	filed with the Florida Dept. of State)
	.9
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fl its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, exter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered." "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A SSS 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A == 30
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent 5905	Hunter Tr Loth St
New Registered Office Address: Tampa (C	Florida 33611 (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent/ I 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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	P Rickey L Hunter Ir	5901 S Leth 87
Add		Tampa, FL Sole !!
Remove 2) K Change	VP Deborah N Baker	854 CR 4820
Add		ake Panasofflee, FL 3353
Remove 3) Change	T Heather K Hunter	
_X Add	_	Tampa, FL 336011
Remove		
4) Change		
Add		
Remove		2022
5) Change		
Add		ASSE 3
Remove		——————————————————————————————————————
6) Change		<u> </u>
Add		
Remove		

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
- / V / A	
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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, inflicate N/A)	
/	

The date of each amendment(s) adoption: date this document was signed.	_5	30	99		, if othe	r than the
Effective date <u>if applicable</u> :	(no more ti	130 han 90 days	diter amendme	nt file date)		_
Note: If the date inserted in this block does a document's effective date on the Department o			statutory filing r	requirements, this	date will not be lis	sted as the
Adoption of Amendment(s) (CF	<u>ieck one</u>))				
The amendment(s) was/were adopted by the action was not required.	incorporator	rs, or board	of directors with	nout shareholder a		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		s. The num	ber of votes cast	for the amendme	TANKS JUN 13 PH	T
The amendment(s) was/were approved by the must be separately provided for each voting					ement SECTION P	E
"The number of votes east for the ame	ndment(s) w	as/were suf	ficient for appro	val	F. 63	. <u> </u>
by(vo	ting group)					5
Signature (By a director, presselected, by an incappointed fiduciar	orporator — if y by that fidu	f in the hand actary) intell name		trustee, or other co		