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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:Marathor	n Boiler& Repair Serv	ice Inc.		
DOCUMENT NU	MBER:				
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.			
Please return all co	orrespondence concerning this	s matter to the following:			
	Troy	Burgess			
	N	ame of Contact Person			
Marathon Boiler & Repair Service, Inc.					
	Firm/ Company				
	3415 Crestwood St.				
		Address			
16.5					
1271	Lake	land, Florida 33812			
e e		ty/ State and Zip Code			
	tcb1	4@verizon.net I for future annual report notification)			
	E-mail address. (to be used	i for future attribut report notification)			
For further information	ation concerning this matter,	please call:			
m.	ov Bunnogg	at ( 863 ) 644-188	7		
	oy Burgess of Contact Person	Area Code & Daytime Tele			
Enclosed is a chec	k for the following amount m	ade payable to the Florida Depart	•		
\$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)		
Mailing A	ddress	Street Address			
Amendmer		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle	e		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

A	Articles of Incorporation	n	45 09
	of		F.C. 7 1
Marathon Bo	oiler & Repair S	ervice, Inc.	製造
(Name of Corporation as curre			SSE - E
J32624			一年 里
	ber of Corporation (if know	wn)	2.0
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this Flo	orida Profit Corporati	ion adopts the following
A. If amending name, enter the new name of	the corporation:		
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "profined by the second se	designation "Corp," "Inc, fessional association," or included in the sessional association, or included in the sessional association as a sessio	," or "Co". A profess the abbreviation "P.A.	orporated" or the sional corporation "
D. If amending the registered agent and/or renew registered agent and/or the new regis		1 Florida, enter the na	ime of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street a	ddress)	
		, Florida	a
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin	ng Registered Agent:		
I hereby accept the appointment as registered a		nd accept the obligation	ns of the position.
	Signature of New Registered	d Agent if changing	_
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "profined B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)  D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  New Registered Agent's Signature, if changing the proportion as registered agent and the proportion of the new registered agent and the proportion of the new registered agent and the proportion of the new registered agent and the proportion of the proportion of the new registered agent	the word "corporation," designation "Corp," "Inc, fessional association," or include:  It ADDRESS  CE BOX  registered office address in stered office address:  (Florida street address:  (City)  Ing Registered Agent: I am familiar with an incomplete inco	n Florida, enter the na  ddress)  , Florida (Zip Code)	sional corporation

## 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: (Altach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	Troy Burgess	3415 Crestwood St. Lakeland, Florida 33812	☐ Add  Remove
<u>VP</u> .	Brian Burgess	3429 Lorie Lane South Lakeland, Florida 33801	☑ Add ☐ Remove
			☐ Add ☐ Remove
(attach	additional sheets, if necessary). (Be	e specific)	
provi		ge, reclassification, or cancellation of iss ent if not contained in the amendment i	
			S. 1111.11

The date of each amendment(s	s) adoption:	May/28/20		
Effective date <u>if applicable</u> :			· . /	
	(no more than 90 a	days after amendm	ent file date)	•
Adoption of Amendment(s)	(CHEC	CK ONE)		
The amendment(s) was/were by the shareholders was/wer			umber of votes cast for the	amendment(s)
The amendment(s) was/were must be separately provided				
"The number of votes c	ast for the amendm	nent(s) was/were si	afficient for approval	
by			.,,	
(	(voting group)			
The amendment(s) was/were action was not required.	e adopted by the bo	oard of directors w	ithout shareholder action ar	ıd shareholder
The amendment(s) was/were action was not required.	e adopted by the inc	corporators withou	it shareholder action and sh	areholder
Dated	May /28/	2009		
Signature	dispator prociden	Sen Sen	of directors or officers have	o not been
selec		rator - if in the har	nds of a receiver, trustee, or	
	ŋ	Troy Burges	8	
	(Турес	d or printed name	of person signing)	<del>-</del> .
	F	President		
	(Title of po	erson signing)		<del></del>