## KA1043

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(Ac	ddress)	•		
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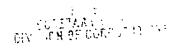
JUN 8 2015 CLEWIS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hydronics Holdings, Inc					
DOCUMENT NUMBER: K21043					
The enclosed Articles of Amendment and fee are su	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
Richard Murray					
	Name of Contact Person				
Hydronics Holdings, Inc					
<del> </del>	Firm/ Company				
4306 Louis Ave					
Address					
Holiday, Fl 34691					
·	City/ State and Zip Code				
rickm@deltahydro.com					
_ ,	sed for future annual report notification)				
E man address. (10 00 th					
For further information concerning this matter, pleas	se call:				
Richard Murray	at ( 727 ) 641-8437  Area Code & Daytime Telephone Number				
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:				
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of



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Hydronics Holdings, Inc			
( <u>Name</u> c	of Corporation as current	ly filed with the Florida Dept. of State)	
K21043			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
		The new	
	ution "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address,	if applicable:	4306 Louis Ave	
(Principal office address MUST BE A S		Holiday, Fl 34691	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		4306 Louis Ave	
· •		Holiday, Fl 34691	
D. If amending the registered agent an new registered agent and/or the new			
·	Richard Murray	<u></u>	
Name of New Registered Agent	4306 Louis Ave		
	<u>.</u>	reet address)	
N D : 100 411	Holiday	34691	
New Registered Office Address:		(City) , Florida (Zip Code)	
New Registered Agent's Signature, if c		<u>t:</u> with and accept the obligations of the position.	
, , , , , , , , , , , , , , , , , , , ,	21		
/.	Sudaya VIII	MANIA FRA 13	
-Cof	Signature of New		
•	signature of New	negative of regent, if entireging	

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	<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>	Name	Address
1) Change	VP	William C Storm	18128 Jorene Road
Add			Odessa, Fl 33556
X Remove			
2) X Change	P	Richard Murray	4306 Louis Ave
Add			Holiday, Fl 34691
Remove			- · · · · · · · · · · · · · · · · · · ·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			-
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	•
f an amendment provides for an exchaprovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del> </del>	

	May 26, 2015	rearrage.	
The date of each amendment(s) a late this document was signed.	doption:	Unclear United North	if other than the
<u> </u>	y 26, 2015		
Effective date <u>if applicable</u> :		15 JUN - I	<u>AM 9: 50</u>
	(no more than 90 days aft	er amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statue epartment of State's records.	tory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad by the shareholders was/were st	opted by the shareholders. The number of options of the compact of the shareholders.	of votes cast for the amendment(s)	
	proved by the shareholders through voting each voting group entitled to vote separ		
"The number of votes cast	for the amendment(s) was/were sufficient	nt for approval	•
by	(voting group)	·*·	
	(voting group)		
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without s	hareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without share	nolder action and shareholder	
Dated	MAY 28,2015	•	
Signature	MAY 28, 2015 WaseN Dunay	7	
(By a c selecte	lirector, president or other officer – it dir ed, by an incorporator – if in the hands of ated fiduciary by that fiduciary)		<del></del>
	RICHARD T.	nueray	
	(Typed or printed name of p	erson signing)	
	PRESIDENT		
	(Title of person	signing)	