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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Fallahassee, FL 32314

NAME OF CORPORATION: Abyss Air	r Conditioning and Heating I	ж.
DOCUMENT NUMBER: <u>1.68859</u>		
The enclosed Articles of Amendment and t	fee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following	· :
Michael J.	Lyublanovits	
	Name of Contac	t Person
Abyss Air o	Conditioning and Heating Inc	·
	Firm Comp	any
495 Crysta	ıl Dr.	
	Address	
Abadaira R	Lough 17 33708	
<u> </u>	City State and Z	ip Code
AbyssAirFL a.i	omail com	
	(to be used for future annual	
For further information concerning this ma	tter, please call;	
Michael J. Lyublanovits	:	at ( 727)   526-2381
Name of Contact Person	٨.	rea Code & Daytime Telephone Number
Enclosed is a check for the following amou	int made payable to the Florid	la Department of State:
D 434	¥	
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & — Certificate of Status	\$43.75 Filing Fee & Certified Copy	□\$52,50 Filing Fee & Certificate of Status &
Confidence of Studies	, ,	ed Copy enclosed) Certified Copy
	• •	(Additional Copy is enclosed)
Mailing Address		Street Address

Amendment Section

Cliffon Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment

#### to

### Articles of Incorporation of

	f Incorporation of	
Abyss Air Conditioning and Heating Incorporated	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	2019 FES = 1 TETTE g 1	
(Name of Corporation as curr	rently filed with the Florida Dept. of State)	
1.68859	Walter Commence of the Commence	
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section $607,1006$ , Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendi	nent(s)
A. If amending name, enter the new name of the corporation	on:	
V a	$Th \cdot non$	· 11/11/11/2
$\frac{N A }{must}$ he distinguishable and contain the word "corporation," "co or $C\alpha$ ," or the designation "Corp," "Inc," or "Co". A profession professional association," or the abbreviation "P.A."		Inc., "
B. Enter new principal office address, if applicable:	Michael J. Lyublanoyits	
(Principal office address MUST BE A STREET ADDRESS )		
	495 Crystal Dr.	-
	Madeira Beach, FL 33708	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N/A	-
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		
	dress:	
Name of New Registered Agent Michael C. Lyublan 495 Crystal Dr.	dress:	

Michael hyubbanorita 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)

Piease note the officer director title by the first letter of the office title:

 $P = President; \ V * \ Vice President; \ T * \ Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO <math>=$  Chief Evacutive 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 I	<u>)ue</u>	
X Remove	V Mike	lones	
<u>X</u> Add	<u>SV</u> <u>Sally S</u>	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>D</u>	Deborab Lyublanovits	495 Crystal Dr.
Add			Madeira Beach, FL 33708
X Remove			
2) X Change	1)	Michael C. Lyublanovits	495 Crystal Dr.
Add			Madeira Beach, Ft, 33708
Remove			
3) Change	<u> </u>	Michael J. Lyublanovits	495 Crystaf, Dr.
_ <u>X</u> Add			Madeira Beach, F1, 33708
Remove			
4) Change	N/A		
Add			
Remove			
5) Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

	ig additional Articles, enter change recssary). (Be specific)		
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If an amandment and	wides for an exchange, reclassificat	:	
	ions for implementing the amendm		
amendment itself:	(if not applicable, indicate NeA)	Chi ii iioi Contained in the	
	· · · · · · · · · · · · · · · · · · ·		
N/A			
			·
			······································

The date of each amendment(s) adoption: N/A	, if other than the date this document was signed.
Effective date <u>if applicable</u> : <u>N/A</u>	
(no more than 90 days at	ter amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be fisted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the shareholders. The n amendment(s) by the shareholders was/were sufficient for approval.	umber of votes cast for the
The amendment(s) was were approved by the shareholders throug statement—must be separately provided for each voting group entitled	
"The number of votes east for the amendment(s) was/were suffici	ient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors w shareholder action was not required.	ithout shareholder action and
The amendment(s) was/were adopted by the incorporators without the first of the incorporators without the first of the incorporators without the incorporator with the incorporator with the incorporator without the incorporator with the	it shareholder action and shareholder
Dated	
Signature Much July (By a director, president or other afficer—if d selected, by an incorporator – if in the hands of a receive	
appointed fiduciary by that fiduciary)	
Michael C. Lyublanovits (Typed or printed name of	person signing)
Ducctor	

(Title of person signing)