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SECRETARY OF STATE

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT. F	PIPES OF BRO	OWARD COUNTY	', INC.	
SCHOLCT	7	(Name	e of Corpor	ation)
DOCUMENT	NUMBER:	P00000099444		
The enclosed 4)	Resignation for a C	Corporation	and fee are submitted for filing
Please return a	ll corresponden	ce concerning this r	natter to th	e following:
EDWIN SOT	70			•
	(Name o	of Person)		
PIPES OF B	ROWARD CO	DUNTY, INC.		
	(Name of Fi	rm/Company)		
3637 NW 19	TH STREET			
	(Add	iress)		
LAUDERDA	LE LAKES, FL	_ 33311		
<u></u>	(City/State a	and Zip Code)		
For further infe	ormation concer	rning this matter, pl	ease call:	
EDWIN SOT	0	at (954	868-3516
	(Name of Perso	n)	(Area Code	& Daytime Telephone Number)
Enclosed is a c	theck for \$35.00) made payable to th	ie Florida l	Department of State.
Street Addres Amendment So Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	ection rporations ig c Center Circle	Mailing Add Amendment Division of O Post Office Tallahassee,	Section Corporation Box 6327	ns

Articles of Amendment Articles of Incorporation

of

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10 AUG 19	
Siate)	AM 10:42

PIPES OF BROWARD COUNTY, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) E INCLUSION STA

P00000099444

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

•	The new
abbreviation "Corp.," "Inc.," or Co.," or	tin the word "corporation," "company," or "incorporated" or the the designation "Corp," "Inc," or "Co". A professional corporation professional association," or the abbreviation "P.A."
B. Enter new principal office address, if	applicable:
(Principal office address <u>MUST BE A STR</u>	
	
C. Enter new mailing address, if applica	
(Mailing address <u>MAY BE A POST OF</u>	FFICE BOX
	<u>.</u>
I I amanding the registered agent and	or registered office address in Florida, enter the name of the
new registered agent and/or the new r	
	EDW(N COTO
Name of New Registered Agent:	EDWIN SOTO
	3637 NW 19TH STREET
New Registered Office Address:	(Florida street address)
	LAUDERDALE LAKES, Florida 33311
	(City) (Zip Code)
New Registered Agent's Signature, if char	nging Registered Agent: ed agent. Vam familiar with and accept the obligations of the position.
neredy accept the appointment as registere	a agent. Yum jamittar with and accept the obligations of the position.
√ -	XAL XAO
/	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>Name</u>	Address	Type of Action
P	JOEL GLASSMAN	3637 NW 19TH STREET LAUDERDALE LAKES FL 33313	
<u>P</u>	EDWIN SOTO	3637 NW 19TH STREET LAUDERDALE LAKES EL 33313	☑ Add □ Remove
			П Ъ
	nding or adding additional Article additional sheets, if necessary). (H		
			<u> </u>
			
provis		nge, reclassification, or cancellation of ment if not contained in the amendmen	
provis	ions for implementing the amendr		
provis	ions for implementing the amendr		

t(s) adoption: AUGUST 13, 2010
(date of adoption is required) AUGUST 13, 2010
(no more than 90 days after amendment file date)
(CHECK ONE)
ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
cast for the amendment(s) was/were sufficient for approval
(voting group)
(voting group)
re adopted by the board of directors without shareholder action and shareholder
re adopted by the incorporators without shareholder action and shareholder
a director, president or other officer if directors or officers have not been
cted, by an incorporator - if in the hands of a receiver, trustee, or other court
ointed fiduciary by that fiduciary)
EDWIN SOTO
(Typed or printed name of person signing)
PRESIDENT_
(Title of person signing)