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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : SIEGFRIED, KIPNIS, RIVERA, LERNER, DE LA TORRE

Account Number: 076424000767 Phone: (305)442-3334

Phone Fax Number

: (305)443-3292

## COR AMND/RESTATE/CORRECT OR O/D RESIGN

F.A.C. POOLS, INC.

MB FEB 21 AM . 6: 00
ECRETARY OF STATE

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: F.A.C. POOL	_S, INC.	
DOCUMENT NUMBER: P01000044531		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Elisabeth D. Kozlow, Esqui	TO Contact Person)	
(reame of C	Contact Person)	
Siegfried, Rivera, Lerner,		P,A
(Firm/	Сотрапу)	
201 Alhambra Circle, Suite	1102	_
(A	ddress)	
Coral Gables, Florida 33134		
(City/ State	and Zip Code)	<del></del>
For further information concerning this matter, ple	ease call:	
Fliankath D. Karley, Facilità	005 440 9994	aud 04.4
Elisabeth D. Kozlow, Esquire  (Name of Contact Person)	at ( 305 ) 442-3334 (Area Code & Daytime Tele	enhone Number)
Enclosed is a check for the following amount:	- Electronic	Kilins
✓ \$35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 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 FILED

08 FEB 21 PM 2: 25

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

· .A.U. 1	POOLS, INC. (Name of corporation as currently filed with the Florida Dept. of State)
	(
!	P01000044531
: -	(Document number of corporation (if known)
fursuant to the dopts the follo	provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation wing amendment(s) to its Articles of Incorporation:
NEW CORPO	RATE NAME (if changing):
F.A.C. HÖL	DINGS, INC.
Must contain the	word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") apporation must contain the word "chartered", "professional association," or the abbreviation "P.A."
AMENDMEN ind/or Article	TS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) little(s) being amended, added or deleted: (BE SPECIFIC)
	-
	•
	(Attach additional pages if necessary)
f an amendme for implementi	nt provides for exchange, reclassification, or cancellation of issued shares, provisions the amendment if not contained in the amendment itself: (if not applicable, indicate
N/A	
<b>.</b>	,

(continued)

The date of cach amendment(s) adoption: February 21, 2008
Effective date if applicable: February 21, 2008
(no more than 90 days after amendment file date)
Adoption of Amondment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (Byla director, president or other officer - if directors or officers have not been
selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
FRANK A. CINQUEGRANA
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35