P01000111406

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(City/State/Zip/Phone #)	
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(Business Entity Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
Arrow Pool & Spa, Inc. SUBJECT:	
No.	une of Corporation
DOCUMENT NUMBER: P01000111400	í
The enclosed Amendment and fee are st	ubmitted for filing.
Please return all correspondence concer-	ning this matter to the following:
Terry M Glover	
Name of Contact Person	
Arrow Pool & Spa, Inc.	
Firm/Company	
823 S Tyndall Parkway	
Address	
Panama City, FL 32404	
City/State and Zip Cod	e
info@arrowps.com	
E-mail address: (to be used for future	annual report notification)
For further information concerning this	matter, please call:
Terry M Glover	at () 258-6204
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following an	nount:
\$35.00 Filing Fee X \$43.75 Filing F Certificate of S	
Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Arrow Pool & Spa, Inc.

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filed with the Florida Dept. of State	+		
06			
Corporation (if known)	-		
orida Profit Corporation adopts the to	ollowing a	mendm	ent(s) to
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" "company," or "incorporated" or o". A professional corporation name A."	the abbr	eviatio	n
	SECREIÁ!	20 18 NOV -	
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t address)			
, Florida_	<i>(*1: - (*)</i>	 	
.tty)	(Zip Coa	(e)	
th and accept the obligations of the po	sition.		
	Corporation (if known) orida Profit Corporation adopts the form the second professional corporation name of the second corp	Corporation (if known) orida Profit Corporation adopts the following an The second corporated or the abbrevia of the position. Sometimes of the second corporation name of the second	The new "" "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the A." See in Florida, enter the name of the E. C. F. F. S. S. T. F. S. S. T. F. S. S. T. F. S. S. T. F. S. T. S. S. T. F. S. T. S. S. T. F. S. T. S

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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes .	
<u>X</u> Add	<u>sv</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
f an amendment provides for an exchange or ovisions 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)	

	11/05/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory tiling requirepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad- by the shareholders was/were so	opted by the shareholders. The number of votes cast for inflicient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The foreach voting group entitled to vote separately on the amount	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and	I shareholder
11/05/2 Dated	DIS	
	Firm M Store	1
Signature(S	ignature of a director, president or other officer - if in f a receiver or other court appointed fiduciary, by that	the hands fiduciary)
	TERRY M. GLOVER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	