## Poi000117666

| (Re                     | questor's Name)  |             |
|-------------------------|------------------|-------------|
| (Ad                     | dress)           |             |
| (Ad                     | dress)           |             |
| (Cit                    | y/State/Zip/Phon | e #)        |
| PICK-UP                 | ☐ WAIT           | MAIL.       |
| (Bu                     | siness Entity Na | me)         |
| (Do                     | cument Number)   | )           |
| Certified Copies        | _ Certificate:   | s of Status |
| Special Instructions to | Filing Officer:  |             |
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Office Use Only



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10/06/08--01015--014



Aprend. 11/03/08 Dc



October 15, 2008

LAURIE TAUB 4529 S.E. 16TH PLACE CAPE CORAL, FL 33904

SUBJECT: AZTEC PLUMBING, INC.

Ref. Number: P01000117666

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE LIST A SPECIFIC OFFICER TITLE SUCH AS, PRES., SEC., TREA. OR VP FOR EACH OFFICER BEING ADDED TO THE CORPORATION.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Dariene Connell Regulatory Specialist II

Letter Number: 408A00053886

STATE TO YNAT BROSSE AGIROLT BESEARA JUAT

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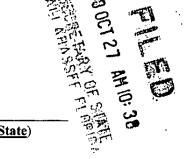
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: Aztec Plu   | mbing, Inc  |   |
|--|---|---|
| DOCUMENT NUMBER: <u>P0100011766</u>  | 66  |   |
| The enclosed Articles of Amendment and fee   | are submitted for filing.   | ,   |
| Please return all correspondence concerning t  | his matter to the following:  |   |
|  | Laurie Taub e of Contact Person)  | <del></del>   |
| (Nami  | e of Confact Person)  |   |
|  | c Plumbing, Inc. Firm/ Company)   | <u>.</u>  |
| (.   | in Company)   |   |
| 452  | 29 SE 16th Place  |   |
|  | (Address)   | 4.1   |
|  | Coral, FL 3390 <b>₹</b>   | · .   |
|  | State and Zip Code)   |   |
| For further information concerning this matter   | r, please call:   |   |
| Laurie Taub  | at ( <u>239</u> ) <u>822-302</u>  |   |
| (Name of Contact Person)   | (Area Code & Daytime  | : Telephone Number)   |
| Enclosed is a check for the following amount   | made payable to the Florida Dep   | partment of State:  |
| \$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status .                              | ✓ \$43.75 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 Ci |   |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



| Aztec Plumbing, Inc  | C                                       |                 |
|--|---|-----------------|
| · (Name of Corporation as currently filed with   | the Florida Dept. of State)             |                 |
| P01000117666   |   | ***             |
| · (Document Number of Corporat   | ion (if known)                          | <del></del>     |
| (Bossinen Number of Corporal   | ion (ii kilowii)                        |                 |
| Pursuant to the provisions of section 607.1006, Florida Statu following amendment(s) to its Articles of Incorporation:                                 | ites, this <i>Florida Profit Corpor</i> | ation adopts    |
| A. If amending name, enter the new name of the corporatio  | on:                                     |                 |
| 1/1  |   |                 |
| The new name must be distinguishable and contain the   | word "composition" "                    |                 |
| "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain association," or the abbreviation "P.A." | .," or the designation "Corp,"          | "Inc," or       |
| D E.4  | , 11                                    |                 |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |   |                 |
| 1 metput office unutess MOST BE A STREET ADDRESS )   |   |                 |
|  |   |                 |
|  |   |                 |
|  |   |                 |
| C. Enter new mailing address, if applicable:   | 11/1-                                   |                 |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )   | N/A                                     |                 |
|  |   |                 |
|  |   |                 |
|  |   |                 |
|  |   |                 |
| D T0 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |   |                 |
| D. If amending the registered agent and/or registered office   |   | ame of the      |
| new registered agent and/or the new registered office add  | iress:                                  |                 |
| Name of New Registered Agent:  | UA-                                     |                 |
| Ivame of Ivew Registered Agent.  | ) <u> </u>                              |                 |
|  |   |                 |
| New Registered Office Address: (Flori  | da street address)                      |                 |
|  |   |                 |
|  | , Flori                                 | da              |
|  | (City) (Zij                             | o Code)         |
|  |   | -               |
| New Registered Agent's Signature, if changing Registered A   | gent:                                   |                 |
|  | familiar with and accept the ol         | bligations of t |
| position.  | -                                       | -               |
| osition.   |   |                 |

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>Title</u>         | <u>Name</u>   | Address                                    | Type of Action                        |
|----------------------|---|--|---------------------------------------|
| Officer              | Gus Centrone  | 15060 Whimbrel Court<br>Ft Myers, FL 33908 | ☐ Add<br>☐ Remove                     |
| Secretary<br>Officer | Christopher Tedesco   | 2825 SW 42nd Lane<br>Cape Coral, FL 33914  | ☑ Add<br>□ Remove                     |
|                      |   |  | ☐ Add<br>☐ Remove                     |
|                      | g or adding additional Articles, enter citional sheets, if necessary). (Be specific                         |  | · · · · · · · · · · · · · · · · · · · |
|                      |   |  |                                       |
|                      |   |  |                                       |
| provisions           | dment provides for an exchange, reclar<br>for implementing the amendment if no<br>applicable, indicate N/A) |  |                                       |
|                      | NIA   |  |                                       |
|                      |   |  |                                       |
|                      | <u></u>   |  |                                       |

| The date of  | of each amendmen                           | t(s) adoption: <u>April 29, 200</u>                             | 08  |
|--------------|--|---|---|
| Effective of | date <u>if applicable</u> :                | April 29, 2008  |   |
|              | <del></del>                                | (no more than 90 days after                                     | amendment file date)  |
| Adoption .   | of Amendment(s)                            | ( <u>CHECK ONE</u> )  | )   |
| The am       | nendment(s) was/we<br>shareholders was/w   | ere adopted by the shareholder<br>vere sufficient for approval. | rs. The number of votes cast for the amendment(s)   |
| The am       | nendment(s) was/we<br>e separately provide | ere approved by the shareholde ed for each voting group entitl  | ers through voting groups. The following statemented to vote separately on the amendment(s):              |
| <b>.</b> "T  | he number of votes                         | cast for the amendment(s) wa                                    | s/were sufficient for approval  |
| by           |  |   | ."  |
| ·            |  | (voting group)  |   |
|              | endment(s) was/we<br>was not required.     | ere adopted by the board of dire                                | rectors without shareholder action and shareholder  |
|              | endment(s) was/we<br>was not required.     | ere adopted by the incorporator                                 | rs without shareholder action and shareholder   |
|              | Dated 10/0                                 | 1/08  |   |
|              | sele                                       | a director, president or other                                  | officer – if directors or officers have not been n the hands of a receiver, trustee, or other court iary) |
|              | ,  | Laurie Taub   | ed name of person signing)  |
|              |  | Officer   | irector person signing)   |
|              |  | ( Title of pr   | CISUII SIRIIIIR I   |