P0200065907

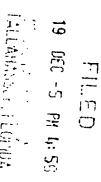
(Re	questor's Name)	
(Ad	dress)	<u>.</u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900337524049

12/05/19--01024--010 **43.75



JAN 1 0 2020 S. YOUNG

COVER LETTER

Division of Corporations .
NAME OF CORPORATION: VKS Plumbing inc DOCUMENT NUMBER: PO200065907
DOCUMENT NUMBER: 70200065 707
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Marie Person
Name of Contact Person
VKS Plumbing inc Firm/Company 883 Oleander Dr.
Firm/ Company
883 Olcandar Dr.
Plantation Fl. 33317 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marie of Contact Person at (95 Y) 274-9984 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S35 Filing Fee Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

of

(Name of Corporation as currently f	iled with the Florida Dept. of State)	
P0200065907		
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Statutes</i> , the statutes of the statutes o	orida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:	1	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/4_	FILED 19 DEC -S PH 14 CAHA: YEL IL
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	18 57 100A
Name of New Registered Agent	N/A	
(Florida street	address)	
New Registered Office Address: (C)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the po.	
Signature of New Reg.	istered 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)

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	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		Vingenth Smith	883 Oleynder Dr.
X Add			Plantation Fl. 33317
Remove			
2) Change		NA	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add		,	
Remove			

Attach ad	ditional shee	g additional A ets, if necessary	e). (Be speci	ific)	<u> </u>			
Nff	7							
7								_
	_							
		 -						
					 -			
	· -				<u> </u>			
								
						 ,		
		 -				<u> </u>		<u> </u>
f an ame	ndment pro	vides for an e	xchange, rech	assification.	or cancellatio	on of issued s	hares.	
provision	ns for implei	menting the a	mendment if i	not contained	in the amer	idment itself	<u>.</u>	
-		e, indicate N/A)	ļ					
N/L]		<u>. </u>			_		
					-			<u> </u>
			<u>.</u>					
					<u></u>			

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: 11-21-19 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	.
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following staten must be separately provided for each voting group entitled to vote separately on the amendment(s):	vent
"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 sharehold action was not required.	ler
☑ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11-18-19	
Dated_11-19-19 Signature_Marie DSmith	
(By a 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 con-	
appointed fiduciary by that fiduciary)	ш
Marie D. Smith (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	