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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Onsite Wastewater Management, Inc. Po2000089089 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lois Hubbart
Name of Contact Person E Wasteunter Managen.
Firm/Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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

(Additional Copy is enclosed)

## Articles of Amendment

to

## Articles of Incorporation of

Onsite Wastewater Management,	tnc	•	
(Name of Corporation as currently filed with the Florida Dep	t. of State	<del></del> )	
P0200089089			
(Document Number of Corporation (if known)			<del></del> -
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> a its Articles of Incorporation:	dopts the f	following	amendment(s) to
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "company," or "incorp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporword "chartered," "professional association," or the abbreviation "P.A."		r the abl	breviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			<del></del>
			<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office address in Florida, enter the na new registered agent and/or the new registered office address:  Name of New Registered Agent	me of the		<del></del>
(Florida street address)			
New Registered Office Address:	Fig. 2 de		
(City)	_, Florida_	(Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligation	≥ုန	osition. 2017 AUG	<u> </u>
Signature of New Registered Agent, if changing	CRETARY OF STA	द्यंत भा	

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:		y 5,777, (°, 'an' 67,7,241)	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	Martin, John J.	5547 3rd Rd LakeWorth, Fl. 3346
Add Remove			<u>Lakeworth, F1.3346</u>
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

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f an amendment provides for an exch provisions for implementing the ame	inge, reclassification, or cal	ncellation of issued shares, he amendment itself:
(if not applicable, indicate N/A)		
<del></del>	<del></del>	
		<del> </del>
<del>-</del>	-	
	<del></del>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(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 date wildocument's effective date on the Department of State's records.	I 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(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.	
Dated8/10/17 SignatureVais M. Aufbart	
(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 court appointed fiduciary by that fiduciary)	
Lois M. Hubbart	_
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	