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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON: FERGUSON & H	OOLIHAN PLUMBING IN	NC	
	P02000127749			
The enclosed Articles of An	nendment and fee are su	bmitted for filing.		
Please return all correspond	ence concerning this ma	tter to the following:		
ROB	ERT SCHLUMBERGE	R		
		Name of Contact Persor	1	
FERG	GUSON & HOOLIHAN	R PLUMBING INC		
	<del></del>	Firm/ Company		
4363	S CASCADE AVE	•		
	· · · · · · · · · · · · · · · · · · ·	Address		
INVI	ERNESS, FL 34452			
<del></del>		City/ State and Zip Cod-	e	
hoolihanpli	ambing@yahoo.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information conc	erning this matter, pleas	se cail:		
ROBERT SCHLUMBERG	ER	at ( 352		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for the t	ollowing amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee [	□\$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 Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FERGUSON & HOOLIHAN PLUMBING INC.

(Name of Corporation as cu	rrently filed with the Florida De	ept. of State)
P02000127749		
(Document Nun	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:	
N/A		The new
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevio	" or "Co". A professional corp.	
B. Enter new principal office address, if applicable:	N/A	201
(Principal office address MUST BE A STREET ADDRESS)		38 77
	<del> </del>	. 2
	<del> </del>	
C. Enter new mailing address, if applicable:	N/A	PR
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<u>بن جرد</u>
		- F
D. If amending the registered agent and/or registered offic	o address in Florida, anter the n	nama of the
new registered agent and/or the new registered office at		ame of the
Name of New Registered Agent N/A		
N/A	· · · · · · · · · · · · · · · · · · ·	
(Flo	rida street address)	<del> </del>
New Registered Office Address:		, Florida
rea registered vigite radicess.	(City)	(Zip Code)
		. , . ,
Number of the Control	August	
New Registered Agent's Signature, if changing Registered. I hereby accept the appointment as registered agent. I am fan		ions of the position.
		•
Cinc. to a control of	New Registered Agent if changin	. <del></del>

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)

\_\_ Remove

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 = ChiefExecutive 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	MIKE HOOLIHAN	5550 NE STATE RD 121
X Add			WILLISTON FL 32696
Remove			
2) Change		_	
Add			
Remove			
3 ) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		<del></del>	<u> </u>
Add			

	ional sheets, if necessi	ігу).— (ве ѕресідіс)				
N/A 						
				18)		
			<u> </u>			
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. If an amend	ment provides for ar for implementing the	<u>exchange, reclassi</u>	fication, or cance	<u>ellation of issued</u> amendment itse	<u>  shares,</u>  f:	
(if not c	ipplicable, indicate N	(A)	tomania in the		<del></del>	
N/A						
				· · · · · · · · · · · · · · · · · · ·		
			.:			

	09/1/2019
The date of each amendment(s) a date this document was signed.	idoption:, if other than the
Effective date if applicable:	
<u> </u>	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
Fine amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
bу:	· · · · · · · · · · · · · · · · · · ·
	(voting group)
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder
9/19/19 Dated	
Signature X	Lund Toryon
(By a	director, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
арроі	nted fiduciary by that fiduciary)
	EDWARD FERGUSON
	(Typed or printed name of person signing)
	PRESIDENT/DIRECTOR
	(Title of person signing)