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C LEWIS

COVER LETTER

Division of Corporations NAME OF CORPORATION: Miami Plumbing & Solar Heating Inc **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Miami Plumbing + 50/00 Heating Inc E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number 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 Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

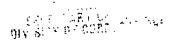
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation



	of	15 JUN 1 1 AM 10: 14
Miami Plumb	poration as currently filed with the Flor	rating Inc
ρ_{0}	ALLO 22 1	ida Dept. of State
P 0 > 00 g	Document Number of Corporation (if known	100)
(t	Document Number of Corporation (if know	wii)
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this Florida Profit Corpo	pration adopts the following amendment(s)
A. If amending name, enter the new name of POPA name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation	Kitzmiller ne word "corporation," "company," or	The new "incorporated" or the abbreviation I corporation name must contain the
word "chartered," "professional association,"		
B. Enter new principal office address, if appl	licable:	
(Principal office address MUST BE A STREET		
		
C. Feter service disconding address if applicables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or re	registered office address in Florida, enter	r the name of the
new registered agent and/or the new regis		
Name of New Registered Agent		
The state of the s		
	(Florida street address)	
	(, , , , , , , , , , , , , , , , , , ,	· ·
New Registered Office Address:	(City)	, Florida (Zip Code)
	(3.4)	(-4)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered a	ng Registered Agent: ngent. I am familiar with and accept the o	bligations of the position.
	Signature of New Registered Agent, if cl	bunging .

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 <math>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>oe</u>	
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		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				_
Remove				
5) Change				
Add		_		
Remove				
Kemove				***
6) Change		_		
Add				
Remove			•	

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·····	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

• • •	Charles Commence
The date of each amendment(s) adoption: date this document was signed.	na 2 6 7 7 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
Effective date if applicable:	15 JIH I 1 AM 10: 14
(no more than 90 days after ame	nament file aate)
Note: If the date inserted in this block does not meet the applicable statutory fidocument's effective date on the Department of State's records.	ling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	s cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately of	
"The number of votes cast for the amendment(s) was/were sufficient for a	approval
by	.,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareho action was not required.	lder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	action and shareholder
Dated 6-8-2015	
Signature Leone R. Kuthin	llis
(By a director, president or other officer – A directors	
selected, by an incorporator – if in the hands of a rece appointed fiduciary by that fiduciary)	eiver, trustee, or other court
(Typed or printed name of person	miller
(Typed or printed name of person	signing)
President	
(Title of person signing	a)