P03000131416

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Johnson's Heating & Air Service INC
OCUMENT NUMBER: P03000131416
he enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Willie J. Johnson Name of Contact Person
Johnnson's Healing LAIR Service INC
1990 Oakeidge Rd East
TAVALASSEE FL. 32305 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Wille J Dhnson at (850) 933-6777 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:
\$35 Filing Fee \$\sum \$\sum \text{\$\sum \sen \text{\$\sum \text{\$\sin \tex
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

20HUZOU 2	Heating +	Air Servi	$Ce^{+}VC$
(Name of Corporation as curren	ntly filed with the Florid	la Dept. of State)	
Po3 000	131416		
	ber of Corporation (if known	own)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this I	Florida Profit Corpora	tion adopts the following
A. If amending name, enter the new name of Johnson's Heating +	alc Serv	ee Inc	The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "professioname must contain the word "chartered," "professioname must contain the word "chartered,"	designation "Corp," "In	c," or "Co". A profe:	ssional corporation
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u>			20112FEB
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>CE BOX</u>)		SSEE, FLORIDA
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered agent.		in Florida, enter the n	ame of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
	<u></u>	, Floric	da
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag		and accept the obligati	ons of the position.
Si	gnature of New Register	ed 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)

Title	<u>Name</u>	<u>Address</u>	Type of Action
			□ Damaua
	ending or adding additional Arti additional sheets, if necessary).		
prov	amendment provides for an excisions for implementing the ame if not applicable, indicate N/A)	hange, reclassification, or cancella ndment if not contained in the ame	tion of issued shares, endment itself:
			•

The date of each amendment	(s) adoption: (date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
The amendment(s) was/wei must be separately provided	re approved by the shareholders through voting groups. The following statemen d 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	2/6/12
sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)