P04000000502

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S. PRATHER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Lofendos General S	Services, Inc			
	BER: P0400000502				
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corre	spondence concerning this mat	eter to the following:			
	Jennifer Stampfli				
	Name of Contact Person				
	Lofendos General Services				
	Firm/ Company				
	6324 Trail Blvd				
		Address			
	Naples, FL 34108				
		City/ State and Zip Code			
	jstampfli@poolanddeckconce	epts.com			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Jennifer Stampfli		at (239	514-5095 de & Daytime Telephone Number		
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check f	or the following 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)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation

Articles of incorporation of		- 11 - 12 - 1
Lofendos General Services, Inc	: _	<u> </u>
(Name of Corporation as currently filed with the Florida Dept. of State)	· · ·	
P0400000502	• •	= = = = = = = = = = = = = = = = = = =
(Document Number of Corporation (if known)	; -4 r	!
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ving amen	idme nt (s) to
A. If amending name, enter the new name of the corporation:		
Pool and Deck Concepts, Inc.	The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con "chartered," "professional association," or the abbreviation "P.A."	ation "Co itain the v	rp.," word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		_
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 name of the new registered agent and/or the new registered office address:		
Name of New Registered Agent	<u>_</u>	
(Florida (rect address) New Registered Office Address:, Florida	(ip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	9n.	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

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			
Add			
Remove			
2) Change			<u> </u>
Add			
Remove 3) Change			
Add		^ X	
Remove		\ \\ \	
4) Change			
Add			
Remove		•	
5) Change			
Add			****
Remove			
6) Change	_		
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
	11
	<u> </u>
	131
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not appreciate, margine 1971)	
	\

	8/10/2024	
The date of each date this docume	n amendment(s) adoption:	, if other than the
Effective date <u>if</u>	applicable:	
	(no more than 90 days after amendment file date)	
	e inserted in this block does not meet the applicable statutory filing requirements, this date with the date on the Department of State's records.	ill not be listed as the
Adoption of Am	nendment(s) (CHECK ONE)	
☐ The amendme action was no	ent(s) was/were adopted by the incorporators, or board of directors without shareholder action ar t required.	id shareholder
	ent(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) tolders was/were sufficient for approval.	
	ent(s) was/were approved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):	2024 AUS
	imber of votes cast for the amendment(s) was/were sufficient for approval	AUS 20
by	(voting group)	- # - O - , -
		· ·
	8/10/2024	7:12
	Signature Signature Staroll'	
	(By a director president or other officer of 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)	
	Jennifer Stampsli	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	