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(Requestor's Name)	
(Address)	_
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(nucless)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Dusiness Littly Name)	
(Document Number)	
Certified Copies Certificates of State	tus
	
Special Instructions to Filing Officer:	

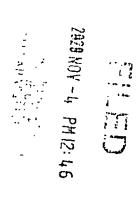




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DEC 12 2020 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RG WALLACE M	ECHANICAL	
	BER: <u>PO4.000</u>		,
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ROGER WALLACE		
		Name of Contact Persor	1
	RG WALLACE MECHANIC	CAL	
		Firm/ Company	
	1905 RIVER OAKS DRIVE		
		Address	
	JACKSONVILLE FL 32259		
	** *	City/ State and Zip Cod	e
	BUDDY.WALLACEHVAC	@GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call;	
ROGER WALLACE		at (⁹⁰⁴	8687592
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	Conficate of Status Conficate 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)
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

R. G. Wallace Meet	1 an ical Inc., tly filed with the Florida Dept. of State)
PO4000091	6409
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the 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," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the 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)	
	<u> </u>
	2:1
	· 6
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
	<u></u>
Name of New Registered Agent	
/CI + I	
(Fiorida Si	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(Mp Coll)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Check if annlicable	

☐ 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)	Title	Name	Address
1) Change	P	Roger G. Wallare	ſŗ
Add		V	
Remove			
2) V Change	VP	Roger G Wallace	
Add		V	
Remove 3) Change	I	Michael C. Walla	(E
Add			
Remove		71	
4) Change	<u>S</u>	Penny Wallace	
Add		,	
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

. If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)			
		· · · · · · · · · · · · · · · · · · ·		
				
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If an amandment movides for an each	anda realessification or con-	collation of issued sho	- 0.5	
 If an amendment provides for an exch provisions for implementing the ame 	ndment if not contained in th	e amendment itself:	165,	
(if not applicable, indicate N/A)		n	~ · ·	_
Roger G. Wa	Mare Dr.	<i>_</i>	8 .5 %	8
0 1; 11		V P	10%	
Airhael (dollars	T	1020	
Park 4 1/2-1/			5 19	
Penny Wall	A L &			
V				

The date of each amendate this document was sign		, if other than the
Effective date <u>if applicab</u>	le:	
	(no more than 90 days after amendment file date)	
Note: If the date inserted document's effective date	in this block does not meet the applicable statutory filing requirement on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment	(s) (CHECK ONE)	
The amendment(s) was action was not required	/were adopted by the incorporators, or board of directors without shareho	older action and shareholder
	/were adopted by the shareholders. The number of votes cast for the ames/were sufficient for approval.	endment(s)
	were approved by the shareholders through voting groups. The followin vided for each voting group entitled to vote separately on the amendmen	
"The number of v	otes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated Signatur	(By a director, president or other officer – if directors or officers have r selected, by an incorporator – if in the hands of a receiver, trustee, or o	not been ther court
	appointed fiduciary by that fiduciary) Rog P. C. T. Walle C. (Typed or printed name of person signing) VP	