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Amend

JUL 29 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FERUAUD	EZ4 SONS PL	UMBING INC	
DOCUMENT NUMB	ER: <u>PO4000</u>	00>17		
The enclosed Articles of	t of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	FERNANDE D9 10 N TAMPA	Address Address City/ State and Zip Cod	PWUBING INC.	
For further information	concerning this matter, pleas	se call:		
ROSA FE	RUANDEZ	E/8) 16	de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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

FERNANDEZ & SON'S PU	UMBIDG, INC
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P0400100217	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	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 "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	3
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
	- 7
	-
	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	sa addressi
(Firmu sixx	C Indivisió
New Registered Office Address:	(City) (Zip Code)
	Chy (hip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
· · · · · · · · · · · · · · · · · · ·	

Signature of New Registered 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:

tAttach 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.

Example: \underline{X} Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) 🔀 Change	<u>9v</u>	-	DANIEL FERMANDEZ	7910 DPACULUDOD NE
Add				TAMPA FC 33604
Remove				
2) Change	VP	_	AVIESER FERNANDEZ	1910 D PACKWOOD AG
Add				MANDA TZ 33604
Kemove	CG.	,	DOCA FORMANDO	DECO LO DALLINON NE
3) Change	<u>Sec</u>	7	EDSA TEXUROPEC	THE D PARYLLOOD NE THATPA FL 33604
Add Remove				
	•			
4) Change		_		
Add Remove				
Kemove				
51 Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets.	additional Artic] , if necessary).	(Be specific)				
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lf an amendment provid	des for an excha	nge, reclassific	ation, or cancel	lation of issued	shares,	
provisions for impleme		<u>dment if not co</u>	ntained in the a	<u>imendment itsel</u>	<u>f:</u>	
(if not applicable, i	naicate N/A)					
· <u></u>						
						
						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 1-1-14 (no more than 90 days after amendment tile date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).	r
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	