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APR 05 2017 K. WHITE

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N:SERI	RANO'S POOL PLASTER	ING, INC			
OCUMENT NUMBER: P05000067186						
The enclosed Articles of Ame	ndment and fee are so	abmitted for filing.				
Please return all corresponden	ce concerning this ma	atter to the following:				
		BAHAR R. HUSSAIN				
	Name of Contact Person					
ROGER A. FOOTE, INC						
Firm/ Company						
7200 LAKE ELLENOR DR SUITE #106						
Address						
	ORLANDO, FL 32809					
<del></del>		City/ State and Zip Cod	e			
	b	ahar2004@bellsouth.net				
E-	mail address: (to be u	sed for future annual report	notification)			
For further information concer	ming this matter, plea	se call:				
BAHAR R. HUSSAIN		at (407	240-1604			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for the fol	lowing amount made	payable to the Florida Depa	artment of State:			
	\$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)			
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

SERRANO'S POOL PLASTERING INC

17 APR -3 AH 9: 16

	RRANGS FOOL FLASTE	KING, INC	
( <u>Name</u>	of Corporation as current	ly filed with the Florida Dept. of S	State) #
	P05000067	186	24 3 4
		f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
SAME NAME			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		SAME ADDRESS	<del></del>
The party of the address MUSI DE AS	INCLI ADDRESS )	<u></u>	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		SAME	
D. If amending the registered agent an new registered agent and/or the new			<u>the</u>
Name of New Registered Agent	ABEL P. SERRANO		
- to the state of	1215 SAND PINE DRIVI		
	(Florida sti	eet address)	<del></del>
<u>New Registered Office Address:</u>	OCOEE	, Flor	34761
New Registered Office Address.		, rior (City)	(Zip Code)
New Registered Agent's Signature, if c			
hereby accept the appointment as regist	ered agent. I am familiar	vith and accept the obligations of th	e position.
	/ Dec-	N-Borns	
			<del></del>
	signature oj New K	egistered 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)

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 Doe				
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	P	ABEL P. SERRANO	1215 SAND PINE DRIVE			
XAdd			OCOEE, FL 34761			
Remove						
2) X Change	VP	ASALIA L. SERRANO	1215 SAND PINE DRIVE			
Add			OCOEE, FL 34761			
Remove						
3) X Change	S	KIMBERLY C. SERRANO	1215 SAND PINE DRIVE			
Add			OCOEE, FL 34761			
Remove						
4) Change	٠					
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)		*			
NONE						
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<ol> <li>If an amendment provides for an exch provisions for implementing the amer</li> </ol>	ange, reclassificand	tion, or car	<u>rcellation of</u> re amendmen	issued shares. at itself:	1	
(if not applicable, indicate N/A)						
NONE						
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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable:  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(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	
Signature BEC P. STO	
(By a director, president or other officer – if 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)	<del>-</del>
ABEL P. SERRANO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	