# P05000086438

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NAISON OF CONTRACTOR

JUL 19 2016

**C LEWIS** 

## **COVER LETTER**

Division of Corporat	ions		
NAME OF CORPORAT	Toda - deduction	'Hoses of La 86438	ateland, Inc.
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.	
Please return all correspor	ndence concerning this mat	ter to the following:	
	Danitation Danitation Tubes 1 2252 E. Latelan  tubesnhos  E-mail address: (to be us	Name of Contact Person  V HOSES OF  Firm/ Company  Edge 1000  Address  City/ State and Zip Code  ed for future annual report	Lakeland, Inc. Dy. 08103
For further information co	ncerning this matter, pleas	e call:	
Robert	J. TVO Contact Person	at ( <u>863</u> Area Coo	) LOS 7 Q 78 de & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	ayable to the Florida Depa	rtment 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)
Mailina	Address	Stroot	Addross

### Mailing Address

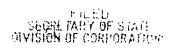
TO: Amendment Section

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 Inco



PH 3: 49

A	of	2016 JUL I I P
Tubes N'Ho	oses of lake	land, Inc.
(Name of Corporation	on as currently filed with the Florid	a Dept. of State)
PØ5Ø0	MMM 810438	•
(Docume	ent Number of Corporation (if known	) .
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the a	" "Inc." or "Co". A professional c	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		he name of the
Name of New Registered Agent		
THE STATE REGISTER AGENT		<del></del>
	(Florida street address)	
	(Finitua sireci adaress)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		gations of the position.
Signa	ture of New Registered Agent if char	nging

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.

Example: X Change	<u>PT</u> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>P</u>	William E. Long	4406 Hallamview Lane Lakeland, FL 33813
_X_ Remove			
2) Change Add	VP_	Patricia P. Long	4406 Hallamview Lane Lakeland, FL 33813
Remove 3) Change Add	P	Robert J. Tino	911 Micanopy Dr. Lakeland, FL 33813
Remove  4) Change Add  Remove	VP_	Danielle R. Tino	911 Micanapy Dr. Lateland, FL 33813
5) Change Add Remove	<del></del>		
6) Change Add Remove		<u> </u>	

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
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		M.: 1850 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	*****
· · · · · · · · · · · · · · · · · · ·				
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassif	ication, or cancel contained in the a	lation of issued sha mendment itself:	ires,
		·		
			·	
		- <del></del>		

Fhe date of each amendment(s) adoption: late this document was signed.	July 1,	2016	ř	, if other than the
Effective date if applicable:	(nomore than 90	days after amendment file date)		CORPORATION  I PM 3: 49
Note: If the date inserted in this block does to locument's effective date on the Department o		ole statutory filing requirements		,, .
Adoption of Amendment(s) (CI	HECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		umber of votes cast for the amer	ndment(s)	
The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the ame	endment(s) was/were	sufficient for approval		
by				
(vo	oting group)			
☐ The amendment(s) was/were adopted by the action was not required.	board of directors w	ithout shareholder action and sh	areholder	
The amendment(s) was/were adopted by the action was not required.	incorporators withou	ut shareholder action and shareho	older	
Dated Tuly 7, 2 Signature X Annie	0016 00 T	Tul de		
(By a director, pre-		r – if directors or officers have n		
· · ·	orporator – if in the ly by that fiduciary)	nands of a receiver, trustee, or ot	her court	
Da	NICI/C R (Typed or printed na	me of person signing)		
	Lice Pro	esident person signing)		