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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following: Name of Contact Person Sludge Suckers, In. 10012 Gruff Center Dr. Suite 5-269 Address Address

Fort Myors, FC 33913

City/ State and Zip Code 5/udgesuckers o botmail.com
E-mail address: (6 be used for future annual report notification) For further information concerning this matter, please call: Russell Fowler at (239) 839 0983

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## **Articles of Amendment** to Articles of Incorporation

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pt. of State)	1410. ST
	03175

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

	The
ame must be distinguishable and contain the word "corpor Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." o ord "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must contain
Enter new principal office address, if applicable: principal office address <u>MUST BE A STREET ADDRESS</u> )	ARCADIA, FZ 34266
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10012 GUIF Center DR Snife 5-269 For Myors, Fl 3391:
	/ '
If amending the registered agent and/or registered office a new registered agent and/or the new registered office add  Name of New Registered Agent	
Name of New Registered Agent	
Name of New Registered Agent  Name of New Registered Agent	la street address)
Name of New Registered Agent  (Florid	a street address)
Name of New Registered Agent  (Florid	(City) (Zip Code)

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: <u>X</u> Change	PT John I	Dog	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	YS	Russell Fowler	2998 NW Highway 70
Add			2998 NW Highway To Arcadia, FC 34266
Remove			<u>,                                     </u>
2)Change	<u>V</u> S	Kimberly Fowler	2998 NW Highway 70 Arcadia, FL 34266
Remove			MICHORIA, PC 21208
3) Change		· .	
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			<del></del>
Remove			
6) Change	<del></del>		
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)			
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an amendment provides for an exch				res,
orovisions for implementing the ame (if not applicable, indicate N/A)	adment if not conta	ined in the amer	idment itself:	
(ij noi applicazie, maicase (viz.)				
	-			

The date of each amendment(s) adoption:	8/3/2018	if other than the
date this document was signed!	,	
Effective date if applicable:	8/3/2018	file date)
<del></del>	(no more than 90 days after amendment)	file date)
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department of		nirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	2 shareholders. The number of votes cast for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he shareholders through voting groups. The g group entitled to vote separately on the an	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by		
(ve	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action as	nd shareholder
Dated 8/3	12018 Jun	
	sident or other officer - if directors or office	ers have not been
•	corporator – if in the hands of a receiver, true	stee, or other court
appointed fiduciar	ry by that fiduciary)	
	(Typed or printed name of person signing)	Couler
	(Typed or printed name of person signing)	
	PARS/CEO	
	(Title of person signing)	