# P0500012744

| (Requestor's Name)                      |   |
|---|---|
| (Address)                               |   |
| (Address)                               |   |
| (City/State/Zip/Phone #)                |   |
| PICK-UP WAIT MAIL                       |   |
| (Business Entity Name)                  |   |
| (Document Number)                       |   |
| Certified Copies Certificates of Status | _ |
| Special Instructions to Filing Officer: |   |
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12/18/14--01004--023 \*\*35.00



(PM) 12-22-14

# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: Mr. C's Plumbing & Septic Inc.  |   |  |             |  |
|--|---|--|-------------|--|
| DOCUMENT NUMBER: P050001274  | 144   |  | Log v       |  |
| The enclosed Articles of Amendment and fee are sub-  | bmitted for filing.   |  | 王元(2)       |  |
| Please return all correspondence concerning this mat   | ter to the following:   |  | THE.        |  |
| Sheryl Mendes  | S   |  |             |  |
| Mr. C's Plumbii  | Name of Contact Persons  Name of Contact Persons  Name of Contact Persons |  | <u> </u>    |  |
| 19932 NW 2 A   | Firm/ Company<br>VE   |  |             |  |
| Miami, Fl. 3316  | Address   |  |             |  |
|  | City/ State and Zip Coo   | le   | <del></del> |  |
| mistercseptic@gm   | nail.com  |  |             |  |
| E-mail address: (to be use   | ed for future annual report   | t notification)  |             |  |
| For further information concerning this matter, please   | e call:   |  |             |  |
| Sheryl Mendes  | 305   | , 651-7859   |             |  |
| Name of Contact Person   |   | ode & Daytime Telephone N  | umber       |  |
| Enclosed is a check for the following amount made p  | payable to the Florida Dep  | artment of State:  |             |  |
| S35 Filing Fee S43.75 Filing Fee & Certificate of Status                                       | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)        | □\$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |             |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amen<br>Divisi<br>Cliffor<br>2661 I                                       | Address dment Section on of Corporations 1 Building Executive Center Circle assee, FL 32301        |             |  |

### **Articles of Amendment** to Articles of Incorporation $\mathbf{of}$

| itiii o o i tarribii iq a coptio iii c | Mr. | C's | <b>Plumbing</b> | & | Septic | Inc |
|--|-----|-----|-----------------|---|--------|-----|
|--|-----|-----|-----------------|---|--------|-----|

(Name of Corporation as currently filed with the Florida Dept. of State)

| P05000127444   |  |  | =/                                 | 岩石                           | سيني<br>آگاس       |
|--|--|--|------------------------------------|------------------------------|--------------------|
|  | nt Number of Corporatio                  |  |                                    | TO THE                       | وري الأ            |
| Pursuant to the provisions of section 607 ts Articles of Incorporation:  | .1006, Florida Statutes, tl              | his <i>Flor<b>ida Profit Co</b>rpo</i> | oration adopts the                 | following an                 | ionulment<br>9     |
| <ol> <li>If amending name, enter the new name</li> </ol>   | ame of the corporation;                  |  |                                    | OR D                         | 7 6                |
| name must be distinguishable and con<br>"Corp.," "Inc.," or Co.," or the design<br>word "chartered," "professional ussocia | ution "Corp," "Inc," o                   | r "Co" A professiona                   | "incorporated"<br>l corporation na | or the abbre<br>me must cont | viation<br>ain the |
| B. <u>Enter new principal office address,</u><br>(Principal office address <u>MUST BE A S</u>                              | <u>if applicable:</u><br>TREET ADDRESS ) | N/A                                    |                                    |                              |                    |
|  |  |  |                                    |                              |                    |
| C. Enter new mailing address, if appli<br>(Mailing address <u>MAY BE A POST</u>  |  | N/A                                    |                                    | <del></del>                  |                    |
|  |  |  |                                    |                              |                    |
| <ol> <li>If amending the registered agent an<br/>new registered agent and/or the new</li> </ol>                            |  |  | r the name of the                  | £                            |                    |
| Name of New Registered Agent   | N/A                                      | CN3.                                   |                                    |                              |                    |
|  | (Florida                                 | street address)                        |                                    |                              |                    |
| New Registered Office Address:   | N/A                                      |  | , Florida                          |                              |                    |
|  | (C                                       | lity)                                  |                                    | Code)                        |                    |
| New Registered Agent's Signature, if c   | hanging Registered Age                   | ent:                                   |                                    |                              |                    |
| hereby accept the appointment as regist  |  |  | bligations of the p                | position.                    |                    |
|  | anatana d'Mont Domistan                  | ad tout it housing                     |                                    |                              |                    |

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:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; V = Vice President; \Gamma = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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          | PT                          | John Doe        |  |
|----------------------------|-----------------------------|-----------------|--|
| X Remove                   | $\underline{\mathbf{y}}$    | Mike Jones      |  |
| <u>X</u> Add               | <u>sv</u>                   | Sally Smith     |  |
| Type of Action (Check One) | Title                       | <u>Name</u>     | <u>Addres</u> s  |
| 1) Change                  | ٧                           | Kemble Ettrick  | 2260 W. Lake Miramar Cir.  |
| Add                        |                             |                 | Miramar, Fl. 33025   |
| Remove                     |                             |                 |  |
| 2) Change                  | V                           | Suzanne Ettrick | 2260 W. Lake Miramar Cir.  |
| Add                        |                             |                 | Miramar, Fl. 33025   |
|                            |                             |                 |  |
| 3) Change                  | ·                           |                 |  |
| Add                        |                             |                 |  |
| Remove                     |                             |                 |  |
| 4) Change                  | <del>etakete tiresena</del> |                 |  |
| Add                        |                             |                 |  |
| Remove                     |                             |                 | <del></del>  |
| 5) Change                  |                             |                 |  |
| Λdd                        |                             |                 |  |
| Remove                     |                             |                 |  |
|                            |                             |                 |  |
| 6) Change                  | <del></del>                 |                 |  |
| Add                        |                             |                 | Approximate the control of the contr |
| Remove                     |                             |                 |  |

| E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific) |   |
|---|---|
| Removing Kemble Ettrick as an officer of the company and adding Suzanne Ettrick   | c as  |
| a Vice President.   |   |
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|   |   |
| . If an amendment provides for an exchange, reclassification, or cancellation of issued shares,                                     |   |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)              |   |
| N/A   |   |
|   |   |
|   |   |
|   |   |
|   | ·· <u>-</u>                                       |
|   |   |
|   |   |
|   | <del>1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,</del> |
|   |   |

| The date of each amendment(s) ad                                  | loption:  | , if other than the |
|---|---|---------------------|
| date this document was signed.                                    |   |                     |
| Effective date if applicable:                                     |   |                     |
|   | (no more than 90 days after amendment file date)  |                     |
| . Adoption of Amendment(s)  | (CHECK ONE)   |                     |
| The amendment(s) was/were ado<br>by the shareholders was/were suf | pted by the shareholders. The number of votes cast for the amendment(s) the first for approval.   |                     |
|   | roved by the shareholders through voting groups. The following statement 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 ado action was not required.            | pted by the board of directors without shareholder action and shareholder   |                     |
| action was not required.  | pted by the incorporators without shareholder action and shareholder  |                     |
| Dated   | DECEMBER 30 2014  | •                   |
| Signature   | A/A/hh  | <del></del>         |
| (By a di<br>selecter  | rector, president or other officer – if directors or officers have not been<br>Loy an incorporator – if in the hands of a receiver, trustee, or other court |                     |
|   | ed fiduciary by that fiduciary)   |                     |
|   | Sheryl Mendes   |                     |
| ·   | (Typed or printed name of person signing)   |                     |
|   | V.P.  |                     |
| •   | · (Title of person signing)   | _                   |



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2014

SHERYL MENDES MR. C'S PLUMBING & SEPTIC INC. 19932 NW 2 AVE. MIAMI, FL 33169

SUBJECT: MR. C'S PLUMBING AND SEPTIC, INC.

Ref. Number: P05000127444

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 514A00027037