

PO6 00000 27202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

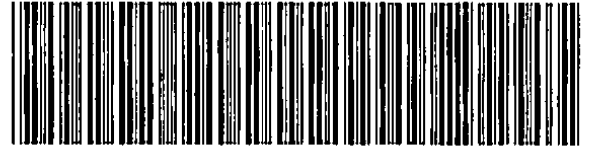
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900376040989

11/08/21--01014--004 **43.75

FILED
21 NOV -8 AM 11:59
T. LEMIEUX

NOV 29 2021
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Plumbing Master Systems Inc

DOCUMENT NUMBER: P06000027202

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sissy Gutierrez

Name of Contact Person
Plumbing Master Systems Inc

Firm/ Company
20861 Johnson Street Suite 109

Address
Pembroke Pines FL, 33029

City/ State and Zip Code
sgutierrez@pmsplumbing.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sissy Gutierrez at (954) 797-7276

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Plumbing Master Systems, Inc.

PO600027202

Perry W. Carrow
Signature of New Representative

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change	<u>P</u>	<u>Perry W. Carrow</u>	<u>15840 SW 12 ST.</u>
<u> </u> Add			<u>Pembroke Pines FL. 33027</u>
<u> </u> Remove			
2) <u> </u> Change	<u>P</u>	<u>Cameron P. Carrow</u>	<u>8842 NW 56 STREET</u>
<u> </u> Add			<u>Coral Springs FL. 33067</u>
<u> </u> Remove			
3) <u>X</u> Change	<u>VP</u>	<u>Jose L. Genes</u>	<u>9350 SW 55th Street</u>
<u> </u> Add			<u>Miami FL. 33165</u>
<u> </u> Remove			
4) <u>X</u> Change	<u>T</u>	<u>Jesse Little</u>	<u>4147 Artesa Drive</u>
<u> </u> Add			<u>Boynton Beach FL. 33436</u>
<u> </u> Remove			
5) <u> </u> Change	<u>VP</u>	<u>Philip Coney</u>	<u>1033 SW 119 Ave</u>
<u> </u> Add			<u>Davie FL. 33436</u>
<u> </u> Remove			
6) <u> </u> Change	<u>S</u>	<u>Brock D. Carrow</u>	<u>15840 SW 12 ST</u>
<u> </u> Add			<u>Pembroke Pines FL. 33027</u>
<u> </u> Remove			

F. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. 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)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

10/11/2021
Dated _____

Signature Perry W. Carrow
(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)

Perry W. Carrow

(Typed or printed name of person signing)

President

(Title of person signing)