## P06000027202

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-
	_	

Office Use Only



500386856115

05/09/22--01029--019 \*\*35.00

7022 1121 -9 PH 4: 32

16

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	<u></u>	<del></del>
DOCUMENT NUMB	ER:		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
-		Name of Contact Person	1
-	Firm/ Company		
-		Address	
-		City/ State and Zip Cod	c
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Name o	f Contact Person	at (	)
	the following amount made		
S35 Filing Fee	S43.75 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)
	ing Address ndment Section		Address Iment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

PLUMBING MASTER SYSTEMS, INC

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
P06000027202		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation	Ė	
-		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation name must	
B. Enter new principal office address, if applicable:		4 29
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		<del>-</del> 5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(	-	<del>نَّ بِ سِرِ</del> دن
	·	<del></del>
D. 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		
(Florida	a street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag		
I hereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of the po	sition.
Signature of Ne	w Registered Agent, if changing	
· · · · ·		
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). 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)

Example:

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.

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	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JOSE L. GENES	9350 SW 55th STREET
Add			MIAMI FL, 33165
X Remove 2) Change			-
Add			21109
Remove 3) Change			
Add			ا ن
Remove			7H 4: 32
Add			
Remove 5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	· · ·
· · · · · · · · · · · · · · · · · · ·	
	· •
f an amendment provides for an exchange, reclassification, or cancel provisions for implementing the amendment if not contained in the	llation of issued shares, amendment itself:
(if not applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·
	<del>-</del>
	-

The date of each amendment(s) ad	option;	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval. $^{\mbox{\colored}}$	2022   161
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	-S PH
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	······································	<u>ي</u> دع
	(voting group)	
03/03/2022 Dated	Ma ID Rurice	
(By a di selected	rector president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	PERRY W. CARROW	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	•