P06000087371

(Re	equestor's Name)	<u> </u>
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

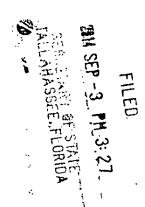
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9/10/14

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Platinum Plumbing Inc DOCUMENT NUMBER: P0600081371 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 Platinum Plumbing Inc					
261 Everglades Blvd 5 Address Vaples Fl 34117 City/ State and Zip Code					
Platinumplumbing a Comcast. Net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call: James D. Hall JR at (239) 877-9704 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:					
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Street Address Amendment Section					
Division of Corporations Division of Corporations					

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment
to Articles of Incorporation FILED
Platinum Plumbing Inch SEP-3 PH 3:27
(Name of Corporation as currently filed with the Florida Dept. of State) STARE JAKY OF THE ORIDA TALLAHASSEE, FLORIDA
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 201 Everglades Blvd 5 Naples, F1 34/17
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Alaples, F1 34/17 Alaples, F1 34/17
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered of fice address: Name of New Registered Agent
Name of New Registered Fig. 6th
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
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; 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 <math>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 D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Je</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One) 1) Change	Title VP	LORI C. Hall	16225 Bollerive Are #1501 Naples Fl 34119
Add Remove 2) Change	Sec	LORI C. Hall	Naples, Fl 34119
Add Remove 3) Change	TRES		Naples, F/ 34119
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

ttach <i>additio</i>	onal sheets,	if necessary).	icles, enter char (Be specific)			
						
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an amendn	ent provid	les for an evel	hange, reclassif	cation or can	cellation of issi	ied shares
rovisions fo	or impleme	nting the amo	endment if not o	ontained in th	e amendment i	tself:
(if not ap	oplicable, ir	ndicate N/A)			•	
	<u>.</u>					
						

The date of each amendment(s) adop	, if other than the	
date this document was signed.	8/10/14	
Effective date if applicable:	(no more than 90 days after amendment file date)	
·	(no more than 90 days after amenament file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated	26/14	
Signature	UD Hall	<u></u>
	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	I fiduciary by that fiduciary)	
_	James D. Hall JR	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	