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COVER LETTER

TO: Amendment SectionDivision of Corporations

NAME OF CORP	ORATION:	Smith & Nissen Plumbing,	Inc.
DOCUMENT NU	MBER:	P06000089120	······································
The enclosed Artic	les of Amendment and fee a	are submitted for filing.	
Please return all co	rrespondence concerning th	is matter to the following:	
-		isa Smith-Nissen	·
	,	Name of Contact Person	
<u>-</u>	Smith 8	& Nissen Plumbing, Inc.	
		Firm/ Company	
		P.O. Box 836	
		Address	
_	Į.	Apopka, FL 32712	
_	C	City/ State and Zip Code	
	smithnissenplu E-mail address: (to be use	mbing@embarqmail.com ed for future annual report notification)	······
For further informa	tion concerning this matter,	please call:	
Lis	a Smith-Nissen	at (407) 46	4-0052
Name	of Contact Person	, Area Code & Daytime Telep	phone Number
Enclose is a check	for the following amount n	nade payable to the Florida Departn	nent of State:
☑ \$35 Filing Fee	\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Smith & N	issen Plumbing, Inc.		
(Name of Corporation as cur	rently filed with the Florida	Dept, of State)	
(Document Nu	amber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		orida Profit Corporation	adopts the following
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the	he designation "Corp," "Inc,	" or "Co". A profession	rated" or the ' al corporation
name must contain the word "chartered," "p	rofessional association," or t	the abbreviation "P.A."	5 e 0
B. Enter new principal office address, if ap			
(Principal office address MUST BE A STRE	ET ADDRESS)		
			28 28 18 18 18 18 18 18 18 18 18 18 18 18 18
			्रिं – न
	···		
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF			2: 0 STATE
(Mulling undress MAI BE A FOST OF F	TCE BUA		
	.		
			
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 re	gistered office address:	The state of the s	<u> </u>
N (N)			
Name of New Registered Agent:	-		
New Registered Office Address:	(Florida street ad	ddress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if change		- d 4d bd: st:	(d
I hereby accept the appointment as registered	ageni. 1 am jamiliar with an	ia accept the obligations of	ine position.
<u></u>		·	
	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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
T	Michael S Scott	1939 Sheeler Oaks Dr. Apopka, FL 32703	Add Remove
	,		
provisi		nge, reclassification, or cancellation on the amendment if not contained in the amendment	
Cancel sh	ares issued to Michael S. Sci	ott; re-issue to Michael E. Nisse	n, Sr.
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s	s) adoption. Dec. 23,00
Effective date <u>if applicable</u> : J	anuary 1, 2009 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	
(1	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Signature	director, president or other officer – if directors or officers have not been
select	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Lisa Smith-Nissen
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)