

PO6000/137866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

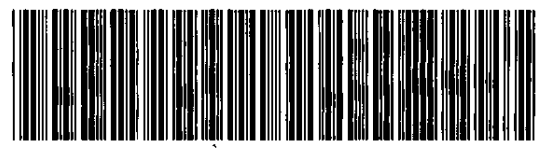
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

6-15-10



400181467264

06/01/10--01026--023 **35.00

Approved
L

FILED
JUN 14 AM 8:30

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JT's Custom Pools, Inc.

DOCUMENT NUMBER: Document # PO6000137866

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

Please return all correspondence concerning this matter to the following:

Jason Taki / Julie Taki
Name of Contact Person

JT's Custom Pools, Inc.
Firm/ Company

1075 Innovation Ave. Suite #111
Address

North Port, FL 34289.
City/ State and Zip Code

jtscustompools@verizon.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason + Julie Taki at (941) 423-9696
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 ☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2010

JASON TARI
J T'S CUSTOM POOLS INC
1075 INNOVATION AVENUE, SUITE 111
NORTH PORT, FL 34289

SUBJECT: JT'S CUSTOM POOLS, INC.
Ref. Number: P06000137866

We have received your document for JT'S CUSTOM POOLS, INC. 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 310A00013859

RECEIVED
JUN 14 AM 8:00
DEPT OF STATE
TALLAHASSEE, FLORIDA

JT's Custom Pools, Inc.

Document# P06000137866

FILED
2010 JUN 14 AM 8:38
FBI - ALBANY

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>	<u>Address</u>	<u>Type of Action</u>
vice president	Julie A. Tari	1075 Innovation Ave Suite # 111 North Port, FL 34289	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
sec	Julie A. Tari	4226 Manchester Terrace North Port, FL 34286	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
president	Jason L. Tari	1075 Innovation Ave Suite # 111 North Port, FL 34289 (remove 4226 Manchester Terrace address) !!	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

change address to new address

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

NA

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)

NA

The date of each amendment(s) adoption: 5/27/10
(date of adoption is required)
Effective date if applicable: 5/27/10
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ 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)

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

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 5/27/10

Signature _____

(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)

Jason L. Tare

(Typed or printed name of person signing)

President

(Title of person signing)