## P070000 24959

(Requestor's Name)			
(Address)	2003438		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	04/27/200		
(Business Entity Name)  (Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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## **COVER LETTER**

TO: Amendment Section Division of Corporations DOCUMENT NUMBER: 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

For further information concerning this matter, please call:

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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Phombing, Heating & A/CINC (Name of Corporation as currently filed with the Florida Dept. of State)	9: 0.9			
(Name of Corporation as currently filed with the Florida Dept. of State)				
P070000 74954				
(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 its Articles of Incorporation:	amendment(s) to			
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 "Inc.," or "Go.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," professional association," or the abbreviation "P.A."	n "Corp.,"			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
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 office address:				
Name of New Registered Agent				
New Registered Office Address: , Florida				
(City) (Zip C	1914E)			
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.				
MA				
Signature of New Registered Agent, if changing				
Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.				

Address of each Officer (Attach additional sheets Please note the officer/di P = President; V = Vice Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and/or D , if necess rector titl President = Chief Fi rector wod In the follows the co	sary)  le by the first letter of the office title;  t; T= Treasurer; S= Secretary; D= Director; TR= Trinancial Officer. If an officer/director holds more than the PTD.  Illowing manner. Currently John Doe is listed as the reorporation, Sally Smith is named the V and S. These s	ustee; C = Chairman or Clerk; CEO = Chief to one title, list the first letter of each office held.  PST and Mike Jones is listed as the V. There is
Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
i) Change	vP	Mary Ann Andrews	601 new 12
Add			SoiteC
Remove  2) Change	sec	TRE/UP WARren A Andrews	601 new Rd
Add			Soile C
Remove Change			Chamad, NOODDI
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
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)	
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The date of each amendment(s) adopti	on:	$\Delta$	1	<u>-</u>	if other than the
date this document was signed.			17		1
Effective date if applicable:		'	'		
Tallypiteus.	(no more than S	00 days after	amendment file	date)	
Note: If the date inserted in this block document's effective date on the Departr		cable statutor	ry filing require	ments, this date will n	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopted action was not required.	by the incorporators, or	board of dire	ectors without sh	areholder action and sl	 hareholder 
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		ne number of	votes cast for th	e amendment(s)	
☐ The amendment(s) was/were approve must be separately provided for each					
"The number of votes cast for the	ne amendment(s) was/wo	ere sufficient	for approval		
by					
	(voting group)				
Dated	In To Pipes	Trulin	s Preso	ha)	
	or, president or other off				
	an incorporator – if in the duciary by that fiduciary		receiver, trustee	, or other court	
	FIPES Act	w,			
	(Typed or printed	l name of pen	son signing)		
	Pres	dent			
	(Title of person s	igning)			