| (Requestor's Name) | |
|--|---------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MA | ML |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: Special Instructions to Filing Officer: Special Instructions to Filing Officer: Wr. F Wallace on 4/2/18 The Approve officer Director The Approve of the North Wallace 18th The Approve of the North Wallace 1 | e5 ~ |

Office Use Only



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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

| NAME OF CORPORATION: Gulf Beaches Air Conditioning, | Inc. |
|--|---|
| DOCUMENT NUMBER: P07000052475 | |
| The enclosed Articles of Amendment and fee are submitted for filing | |
| Please return all correspondence concerning this matter to the following | ing: |
| Frank W. Wallace | |
| Name of Contact Person | |
| Gulf Beaches Air Conditioning, Inc. | |
| Firm/ Company | |
| 417 18th Avenue | |
| Address | |
| Indian Rocks Beach, FL 33785 | |
| City/ State and Zip Code | |
| toptechtampa@gmail.com | <u> </u> |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Frank W. Wallace at (813) 310-9676 | |
| Name of Contact Person Area Code & Daytime Telephone Number | er |
| Enclosed is a check for the following amount made payable to the Flo | orida Department of State: |
| 3 \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □ | 1\$52.50 Filing Fee |
| Certificate of Status Certified Co | |
| (Additional copy is Certified Copy | enclosed) (Additional Copy is enclosed) |
| Mailing Address | Street Address |
| Amendment Section | Amendment Section |
| Division of Corporations | Division of Corporations |
| P.O. Box 6327 | Clifton Building |

Articles of Amendment

2661 Executive Center Circle

Tallahassee, FL 32301

to

Articles of Incorporation of

| Guil Beaches Air Conditioning, Inc. | | I- D4 -664-44 | |
|--|---|--|--------------------------|
| (Name of Corporation as curren | ntly filed with the Florid | ia Dept. of State) | |
| P07000052475 (Document Number | r of Corporation (if know | | |
| | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation: | is Florida Profit Corpord | ation adopts the following | amendment(s) to |
| A. If amending name, enter the new name of the corporation: | 1 | | |
| | | | The new name |
| must be distinguishable and contain the word "corporation," "corpor Co.," or the designation "Corp," "Inc," or "Co". A profession "professional association," or the abbreviation "P.A." | mpany," or "incorporated nal corporation name mu | d" or the abbreviation "Co st contain the word "chart | orp.," "Inc.," ered," |
| B. Enter new principal office address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | | (20) |
| | | , 44 , 44 | |
| C. Enter new mailing address, if applicable: | | 1 | |
| (Mailing address MAY BE A POST OFFICE BOX) | | A. C. | ्रा हिं |
| | | 3.46 | <u> </u> |
| | | F | <u></u> |
| | | | |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add | | the name of the | |
| Name of New Registered Agent | | | |
| | | | |
| (Florida | street address) | | |
| New Registered Office Address: | (City) | , Florida(Zip C | 'ode) |
| | (City) | 12.p C | out) |
| New Registered Agent's Signature, if changing Registered Age | ent. | | |
| I hereby accept the appointment as registered agent. I am familia | | ligations of the position. | |
| | | | |
| | | | |
| | | | |

Signature of New Registered Agent, if changing

Page 1 of 4

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 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) | <u>Title</u> | <u>Name</u> | | <u>Addres</u> s |
| 1) Change <u>DS</u> | _ | Richard Huerta | 1674 Laura St., (| Clearwater, FL 33755 |
| Add | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | - | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | _ | - | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | _ | | | |

| 6) | Change | | | <u></u> | _ |
|----|---|---|--|-----------------|---------------|
| | | | | | |
| - | Add | | | | |
| | Remove | | | | |
| | Remove | | | | |
| | | Pag | e 2 of 4 | | |
| E. | If amending or adding additiona | l Articles, enter change | (s) here: (Attach | | |
| | additional sheets, if necessary). | (Be specific) | | | |
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| F. | If an amendment provides for a | | | | |
| | issued shares, provisions for im amendment itself: (if not a | plementing the amendn pplicable, indicate N/A) | nent if not contained | <u>d in the</u> | |
| | amendment users. (y not a | pplicuole, maicule 14A) | | | |
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