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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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2011 APR 10 P 12: 26
SECRETARY OF STATES
TALLAHASSEE, FLORIDA

APR 11 2017. T. LEMIEUX



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: DQ's Pool Service	Inc		
DOCUMENT NUMB				
	of Amendment and fee are su	ıbmitted for fil	ing.	
Please return all corres	pondence concerning this ma	atter to the follo	owing:	
	Donald Quiggle			
•		Name of C	ontact Person	n
	DQ's Pool Service Inc			
		Firm/	Company	
	5713 Cove Circle			
•		Ad	dress	
	Naples FL 34119			
•		City/ State	and Zip Cod	e
dqspo	olservice@yahoo.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Donald Quiggle		at i	,239	) <u>687-0107</u>
Name o	f Contact Person	***************************************	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the	Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified ( (Additiona enclosed)	Copy Il copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ing Address			Address
	ndment Section		Amendment Section	
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building	
	hassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



(Zip Code)

(Name of Corporation as currently filed with the Florida Properties Fig. 10 | 2: 26

(Document Number of Corporation (if knowledge And See Fig. 10 | 12: 26

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation 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.", 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)

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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

DQ's Pool Service Inc.

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

(Florida street address)

## 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 manual the V and S. These should be noted as John Doe, FT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	DR	<del></del>	Johnny Roberts	
Add * Remove				
2) Change	D	<del></del>	Andrew Budz	
Add Remove				
3) Change	Director	г	Jason Lowery	681 95th Ave N
* Add	<del></del>	_		Naples FL 34108
Remove				W1-1-W1-1-W1-1-W1-1-W1-1-W1-1-W1-1-W1-
4) Change		_		
Add				
Remove				
5) Change		<del></del>		
Add				
Remove				-
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
٠.	
<del></del>	
<u>f an amendment provides for an exch</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this blo document's effective date on the Department.	ock does not meet the applicable statutory filing artment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cas icient for approval.	t for the amendment(s)
	oved by the shareholders through voting groups.  ach voting group entitled to vote separately on th	
"The number of votes east fo	r the amendment(s) was/were sufficient for appro	val
by		.,
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder	action and shareholder
The amendment(s) was/were adopt action was not required.  Dated	ted by the incorporators without shareholder action	on and shareholder
Signature	mma	
	ector, president or other officer - if directors or of	fficers have not been
	by an incorporator - if in the hands of a receiver,	trustee, or other court
appointed	d fiduciary by that fiduciary)	
_	Donald Quigg 16	· · · · · · · · · · · · · · · · · · ·
	(Typed or printed name of person signi	ng)

(Title of person signing)