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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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## **COVER LETTER**

ţ.,

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: American Co	nstruction and Plu	mbing of SWFL, Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are suf	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
John Burrows, Jr			
Amelican	Name of Contact Berso  Con Struction  Firm/ Company	land Plambing of	'swel.
2094 Beacon Mar	- 111.12 Gottipani)	O	
Fort Myers, FL 33	Address 907		
	City/ State and Zip Cod	e	
john@acpfl.co			
E-mail address: (to be use	ed for future annual report	notification)	
For further information concerning this matter, please	e call:		
John Burrows, Jr	<sub>at (</sub> 239	, 896-2947	
Name of Contact Person		de & Daytime Telephone Number	_
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:	
\$35 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		Address Iment Section	

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



American Construction and Plumbing of SWFL, Inc.

14 NOV 14 PH 3: 16

(Name of Corporation as	Po'7000C	orida Dept. of State) 88374		
(Documer	nt Number of Corporation (i	(known)		•
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following	g amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
				_The new
name must be distinguishable and cond "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corpo	porated" or the al pration name must c	bbreviation contain the
B. Enter new principal office address,	if annlicable:	2094 Beacon I	Manor Dr	
(Principal office address MUST BE A S		Fort Myers, FL	. 33907	•
C. Enter new mailing address, if appli	cable:	2094 Beacon I	Manor Dr	
(Mailing address MAY BE A POST (				•
		Fort Myers, FL 33907		-
				-
D. If amending the registered agent an new registered agent and/or the new			ame of the	
	John Bur	=		
Name of New Registered Agent 2094 Beaco				
	(Florida str		_	
New Registered Office Address:	Fort Myers	, Florid	<sub>da</sub> 33907	
	(City)		(Zip Code)	•
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar v	i with and accept the obligation	ons of the position.	
Si	gnature of New Registered A	Igent, 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)

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.

Example: 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	VP	Gerald Bartlett	2094 Beacon Manor Dr		
Add			Fort Myers, FL 33907		
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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)	Attach additional sheets,	additional Articles, en if necessary). (Be s	pecific)		
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(if not applicable, indicate N/A)	provisions for impleme	enting the amendmen	it if not contained	in the amendment	itself:
	(if not applicable, i	ndicate N/A)			
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The date of each amendment(s) adoption:		FILET SECRETARY ( DIVISION OF CO	
date this document was signed.  Effective date if applicable:	8/25/14	14 NOV 14	PH 3: 16
Adoption of Amendment(s)	(no more thán 90 days after amena	lment file date)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	CHECK ONE)  the shareholders. The number of votes corrapproval.	ast for the amendment	(s)
The amendment(s) was/were approved by must be separately provided for each voti	the shareholders through voting groups. ing group entitled to vote separately on	The following statem the amendment(s):	ent
	nendment(s) was/were sufficient for app	roval	
by	voting group)	,,,,	
The amendment(s) was/were adopted by the action was not required.  The amendment(s) was/were adopted by the action was not required.			ler
DatedSignature	Sumous A		
selected, by an ir	esident or other officer—if directors or accorporator—if in the hands of a received ary by that fiduciary)  Tohy  URLOWS	officers have not been or, trustee, or other cou	ırt
	(Typed or printed name of pers		