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FILED

OCT 0 2 7017

COVER LETTER

TO: Amendment Section **Division of Corporations**

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Bayfront Plumbing Inc. NAME OF CORPORATION: DOCUMENT NUMBER: P08000005921

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

Please return all correspondence concerning this matter to the following:

Cynthia Peer

Name of Contact Person

Bayfront Plumbing Inc.

Firm/ Company

10281 Sorrento Rd, #3

Address

Pensacola, FL 32507

City/ State and Zip Code

cindy@bayfrontplumbing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>\$50</u>) - 492,8200 Area Code & Daytime Telephone Number Cindy Peer Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

Certificate of Status

📕 \$35 Filing Fee □\$43.75 Filing Fee & □S43.75 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

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	Articles of Amendment
	to Articles of Incorporation
	of the second se
Bayfront Plumbing Inc.	FILED
(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P08000005921	. 甜 SEP 29 户 3 03
(Docum Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporation</i> (if known)
A. If amending name, enter the new name of the co	orporation:
<u> </u>	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	p," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADI</u>	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	nia
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	nja
	(Florida street address)
<u>New Registered Office Address:</u>	, Florida, <i>Ciry</i>

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

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)

•

Please note the officer/director title by the first letter of the office title:

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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:

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<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
<u>X</u> Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Chaz P. McGee	91 Moonflower Ct
XAdd			Pensacola, FL 32506
Remove			
2) Change			···
Add Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			·
ல் Change			
Add			
Remove			

(Attach a	ding or adding addit udditional sheets, if ne	cessaril.	(Be specifi	nangets) ni c)	<u>ar</u> .			
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F. Ifan an	<u>iendment provides fe</u>	or an evcha:	nve. reclas	sification.	or cancella	tion of issu	ed shares	
provisi	ons for implementing	g the amend						
	not applicable, indica							
Cynthia L.	Peer has given 10 sha	es to Chaz I	P. McGee,	Cynthia L.	Peer has gr	ven 5 share:	to Casey D	. McGee, Jr.
								-
		<u> </u>			<u></u> _			

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The date of each amendment(s) adopti	9/20/2017 on:	, if other that
date this document was signed. 9/20/2013	7	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requirements, this date	will not be listed a
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes east for the amendment(s) int for approval.	
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes east for th	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
9/27/2017 Dated		
8 121	tey &. Pecr	
(By a directo	r, president or other officer – if directors or officers have not been	
	an incorporator $-$ if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
	hia Peer	
	(Typed or printed name of person signing)	·
Vice	President	
	(Title of person signing)	