P08000012835

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Amendico

MAY 1 6 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	UND UTILITIES INC			
DOCUMENT NUMBER	D0000004000E				
The enclosed Articles of A	mendment and fee are sub	mitted for filing.			
Please return all correspon	dence concerning this matt	er to the following:			
AYI	MEE MINAYA				
		Name of Contact Persor	<u> </u>		
CD	CDRS PROFESSIONAL SERVICES INC				
		Firm/ Company			
602	0 RADIO RD				
		Address			
NA	PLES FL 34104				
		City/ State and Zip Code			
CDRSPF	ROFF@ME.COM				
	E-mail address: (to be use	d for future annual report	notification)		
For further information con	ncerning this matter, please	cail: at (239	919-0045		
Name of Co	ontact Person	at (Area Coo) de & Daytime Telephone Number		
Enclosed is a check for the					
□ \$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)		
Amendn Division P.O. Bos	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

JRL UNDERGROUND UTILITIES IN		. Mil. i. tal. at Pit 11 P	N
<u>Name)</u> 208000012835	of Corporation as currently	filed with the Florida D	ept. of State)
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	7.1006, Florida Statutes, this F	lorida Profit Corporation	n adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associo	nation "Corp," "Inc," or "C	Co". A professional corp	
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			··.
C. Enter new mailing address, if appl			SECORETAN F
internal desires and an analysis of the second	<u> </u>		OF STATE
. If amending the registered agent an new registered agent and/or the ne		ss in Florida, enter the i	name of the
Name of New Registered Agent	CDRS PROFESSIONAL	SERVICES INC	
	6020 RADIO RD		
	(Florida stree	et address)	
New Registered Office Address:	NAPLES		34104 . Florida

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:

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	PT	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>	Address
1) Change	P	LINSKY T LAINE	3352 POINSETTIA AVE
Add			NAPLES FL 34104
X Remove			
2) Change	VP	JENNIFER LAGUERRE	3352 POINSETTIA AVE
Add			NAPLES FL 34104
X Remove			
3) X Change	Р	JEAN LAGUERRE	3352 POINSETTIA AVE
Add			NAPLES. FL 34104
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

<u></u>	icles, enter change(s) here: (Be specific)
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
ut not appurable indicate N/A\	
(if not applicable, indicate N/A)	
(if noi applicable, indicale N/A)	
(if noi applicable, indicale N/A)	
(ij noi applicaole, indicale N/A)	
(ij noi appiicavie, indicale N/A)	
(ij noi applicable, indicale N/A)	
(ij noi applicable, indicate N/A)	

01/01/2017	20 at at at
	, if other than the
date this document was signed.	
. 03/15/2018 Effective date <u>if applicable</u> :	
(no more than 90) days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will	not be listed as the
document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
 □ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder 	
action was not required.	
05/07/2018 Dated	
Signature topulation	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
JEAN LAGUERRE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	