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EB 26 PH I2: 37

R. WHITE FEB 2 8 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AC INSTALL PRO	OS, INC.	
DOCUMENT NUMB	ER:	<del></del>	<del></del>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Anthony Pinizzotto		
-		Name of Contact Person	1
	Anthony Pinizzotto, P.A.		
•		Firm/ Company	
	3959 S. Nova Road, Suite 23	•	
•	<del>_</del>	Address	
	Port Orange, FL 32127		
-		City/ State and Zip Cod	e
tpiniz:	zotto@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Anthony Pinizzotto		at ( <sup>386</sup>	585-8027
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 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 Tallabasson, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation



18 FEB 26 PH 12: 37

AC INSTALL PROS, INC.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(Name	of Corporation as current	ly filed with the Florida Der	ot. of State)	
P08000022487				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation :	adopts the following	, amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpor	porated" or the ab-	
B. Enter new principal office address, if applicable:		4820 LaSalle Way		
(Principal office address MUST BE A S		Sarasota, FL 34231		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
				<del></del>
<li>If amending the registered agent ar new registered agent and/or the ne</li>			me of the	
Name of New Registered Agent	N/A			
	(Florida st	reet address)		
New Registered Office Address:	N/A		. Flo <del>r</del> ida	
nes negative spice num ess.		(City)	(Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regis			ns 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:

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>Address</u>
1) Change	<u>v</u>	PHENG CHEN	447 Oakland Park Boulevard
x Add			Port Orange, FL 32127
Remove			
2) Change		_	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
O Charac			
6) Change	<u>-</u>	<u> </u>	<del></del>
Add			
Remove			

(Attach	nding or adding additional Art additional sheets, if necessary).	(Be specific)			
I/A					
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. If an ar	mendment provides for an excl	nange, reclassificațio	n, or cancellation	of issued shares,	
provis	sions for implementing the ame	ndment if not contai	ned in the amend	ment itself:	
	f not applicable, indicate N/A)				
!/A			······································		
			<u> </u>		
· · · · · ·	<del></del>			<del>.</del> .	

	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	1(s)
☐ The amendment(s) was/were at must be separately provided for	proved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s):	ment
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were acceptance acce	lopted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 2	-20-2018	
Signature	Dul Be	
(By a select	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other conted tiduciary by that fiduciary)	
	CHARLES R. JONES	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	PRESIDENT	
	(Title of person signing)	