P080000 43175

(Requestor's Name)
(requested a realine)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Commod Copies
Consideration As Cities Officer
Special Instructions to Filing Officer:
/

Office Use Only



900340184099

02/05/20--01018--006 **35.00

FILED
2020 FEB - 5 PM 12: 45

Amund

MAR 0 2 2020 I ALBRITTON

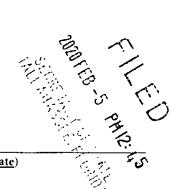
COVER LETTER -

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: All About Pool Sup	oplies Inc	<u></u>	
	MBER: P08000043175			
	les of Amendment and fee are su	bmitted for filing.		
Please return all co	rrespondence concerning this ma	tter to the following:		
	Timothy Shippee			
		Name of Contact Persor	1	
	Hathaway & Reynolds, PLLC	•		
		Firm/ Company	1.12 22 1.12 2.11 2.11	
	50 A1A North, Suite 108			
	Address			
	Ponte Vedra Beach, FL 3208	2		
		City/ State and Zip Code	2	
	catherineseneca [3@gmail.co	ın		
		sed for future annual report	notification)	
For further informa	tion concerning this matter, plea	se call:		
Timothy Shippee		9(14 at (280-5526	
Nan	ne of Contact Person	at (904) 280-5526 Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of



All About Pool Supplies Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000043175

			-
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	amendmen
A. If amending name, enter the new n	ame of the corporation:		
		2	The new
name must be distinguishable and contain "Inc" or Co.," or the designation "C "chartered," "professional association,"	'orp, " "Inc, " or "Co"	company," or "incorporated" or the abbreviation 1 professional corporation name must contain	"Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		7592 Alameda Way	
		Keystone Heights, FL 32656	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 395	
		Palatka, FL 32178	
D. If amending the registered agent ar			
new registered agent and/or the ne-		<u>:</u>	
Name of New Registered Agent	Catherine Marie Seneca		
	7592 Alameda Way		
	(Florida str	eet address)	
New Registered Office Address:	Keystone Heights	. Florida 32656	
	-	(City) (Zip Co	de)
New Registered Agent's Signature, if c		<u>:</u> vith and accept the obligations of the position.	
	,	The time the configuration of the position.	
C;		_	
(nuh	erun ymuli	Seneca	
	Signature of New R	egistered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Add

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 V Mike Jones X Add \underline{SV} Sally Smith Title Address. Type of Action Name (Check One) Catherine Marie Seneca 7592 Alameda Way 1) X Change Keystone Heights, FL 32656 ____ Add __ Remove 2) Change Add Remove 3) Change ___ Add ___ Remove 4) ____ Change ___ Add ____ Remove 5) ____ Change Add Remove 6) ____ Change

	r adding additiona nal sheets, if necesso	ary). (Be specifi	c)		
			 -	 .	
			-		
					·
					
				 .	
	<u> </u>				
-					
		-			
				·	
<u>f an amendme</u>	ent provides for ar	<u>n exchange, reclas</u>	sification, or cand	ellation of issued sh	ares,
DI OAISIOHS IOI	olicable, indicate N	<u>e amendment ir no</u> 74)	or contained in the	e amendment itself:	
(if not ap)		•			
(if not app		····			
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					

.

The date of each amendment(s) ad	option:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	·)
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the ar ficient for approval.	nendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
h.,		
by	(voting group)	
Dated 1 - 29	- 20 20	
Signature _ (b	therine Maria Seneca	
(By a di selected	rector, president or other officer – if directors or officers have, by an incorporator – if in the hands of a receiver, trustee, ored fiduciary by that fiduciary)	
	Catherine Marie Seneca	
-	(Typed or printed name of person signing)	**************************************
	President	
•	(Title of person signing)	*** **********************************