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14 APR 16 AH 9: 58
SECRETARY OF STATE
HALL AHASSEF IT ORDA

APR 23 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: BUCK Plumbing, Inc.  DOCUMENT NUMBER: PO800072290
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Janet L. Buck  Name of Contact Person  Buck Plumbing Inc.  Firm/Company  15322 CrickeT Lane  Address  Fort Mycrs FL 33919  City/ State and Zip Code  Buck 15322 Comcast and Company  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Janet L. Buck at (239) 433-0051  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

Articles of Incorporation

FILED

14 APR 16 AM 9:58 SECRETARY OF STATE WALLAHASSEE, FLORIDA. (Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

	100007	2290	45.	TECKNASSEE, FLORID
(Document Numb	er of Corporation (if kr	nown)		
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this <i>Fla</i>	orida Profit Corpor	ration ado	pts the following amendme
A. If amending name, enter the new name of the	he corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," or	Corp," "Inc," or "Co	". A professional		
B. Enter new principal office address, if applie	cable:			
(Principal office address MUST BE A STREET				
C February william address if anythering				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)			
	-			
D. I				
D. If amending the registered agent and/or reg new registered agent and/or the new registered		<u>s in Florida, enter</u>	the name	of the
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:			Florida	
	(City)			(Zip Code)
New Registered Agent's Signature, if changing				<i>c.t.</i>
I hereby accept the appointment as registered age	ent. I am jamiliar with	n and accept the ob	tigations	of the position.
Ciomateuro	of May Parintaged Area	mt if ahanaina		

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:	re, and buny binnin, ar we an new.	
X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Ronald D Buck	15322 CrickeThane
Add	deceased 3/20/14	FORT Mycrs, FL 33919
2) Change	P, VP, T,S Janet L. Buck	15322 CrickeThane
Add Remove		33919
3) Change		
Remove		
4) Change		
Add Remove		
5) Change		
Add Remove		
6) Change		
Add		
Remove		

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	***************************************
	<del></del>
	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
Husband died	1 36014.
A11 10 5ha	res of STock Should d To Janet L. Buck.
re Iransforce	d TO TONET 1 BUCK
De Harriette	a 10 states e. Dass.
	•

The date of each amendment(s) adoption: 4 14 14 date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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.	
Dated 4/14/14	
Signature Buck	
(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)	
Janet L. Buck (Typed or printed name of person signing)	<u> </u>
11D T S	ei
(Title of person signing)	<del>1</del>
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