P1000018499

(Reque	stor's Name)	
(Addre	SS)	
(Addres	ss)	
(City/Si	tate/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nam	ne)
(Docum	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filir	ng Officer:	

Office Use Only



500184511255

09/01/10--01010--021 **43.75



me 1/201

COVER LETTER

TO: Amendment Section - Division of Corporations

NAME OF CORP	ORATION:	SwimQuest Pool Systems	, Inc.		
DOCUMENT NU	MBER:	P10000018499			
The enclosed Artic	les of Amendment and fee a	re submitted for filing.			
Please return all co	rrespondence concerning th	is matter to the following:			
		James Metcalf			
	r	Name of Contact Person			
	SwimQ	uest Pool Systems, Inc.			
		Firm/Company			
	18	3721 Spruce Dr. W.			
•		Address			
	_	t. Myers, FL 33967			
•		City/ State and Zip Code			
	homesit E-mail address: (to be use	tters@earthlink.net od for future annual report notification)			
For further informa	ation concerning this matter,	please call:			
		41 \	80-5005		
Name	of Contact Person	Area Code & Daytime Tel	lephone Number		
Enclosed is a check	k for the following amount r	nade payable to the Florida Depar	tment of State:		
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing A		Street Address Amendment Section			
Amendment Section Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building			
		2661 Executive Center Circ Tallahassee, FL 32301	le		

Articles of Amendment to Articles of Incorporation of

SwimQuest Poo	oi Syster	ns, inc.	· · · · · · · · · · · · · · · · · · ·	
(Name of Corporation as currently	filed with	the Florida Dept	t. of State)	
P10000018499			_	
(Document Number of Corporation (if known)				•
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	lorida Statut	tes, this <i>Florida</i>	Profit Corporati	on adopts the following
A. If amending name, enter the new name of the	corporatio	<u>n;</u>		·
N	N/A			The new
name must be distinguishable and contain the vabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	ignation "C	orp," "Inc," or	"Co". A profess	sional corporation
B. Enter new principal office address, if applicab	ble:	N/A		<u>: 50 _</u>
(Principal office address MUST BE A STREET AL	DDRESS)			CCS S O
			<u>.</u> .	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>BOX</u>)	.N/A		AM 10: 58 OF STATE E, FLORIDA
D. If amending the registered agent and/or registered agent and/or the new registered	ed office ad	address in Flor dress:	ida, enter the na	me of the
Name of New Registered Agent: N/A	4			
New Registered Office Address:	(Flori	ida street addres.	s)	
			, Florida	a
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.	t. I am fam			ns of the position.

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) Title Name Address **Type of Action** PD Catherine Metcalf ☐ Add 18721 Spruce Dr. W ☑ Remove Ft. Myers, FL 33967 **James Metcalf** PD VD Michael Glore ___ [2] Add P.O. Box 368155 Bonita Springs, FL 34136 Remove * (place see nextpage) E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

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)

<u>Title</u>	Name	Address	Type of Action
<u>VD</u>	James Metcalf	18721 Spruce Dr. W. Ft. Myers FL 33967	☐ Addi ☑ Remove
			Add Remove
			Add Remove
	iding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provis	mendment provides for an exchange, ions for implementing the amendment not applicable, indicate N/A)	reclassification, or cancellation of is if not contained in the amendment	sued shares, itself:

The date of each amendmen	t(s) adoption: August 22, 2010
Effective date if applicable:	(date of adoption is required) August 22, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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	27
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Aug	ust 22, 2010
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
. ар	white freeday by that freeday)
	Catherine Metcalf
	(Typed or printed name of person signing)
	President
	(Title of person signing)