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SECRETARY OF STATE
TALLAMASSEE FLORIDA

OCT - 8 2013 T. CARTER

COVER LETTER

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Cinda Icelana
Name of Contact Person
GN PLUMBING CORP.
6000 De de Park Carporation Circle
Address
++. Myers FL 33905
City/ State and Zip Code
rube @ em baramail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

TO: Amendment Section

□\$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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**



of.	13 SEP 30	PM 4: 17
GN PLUMBING CORP	15 051 04	
(Name of Corporation as currently filed with the Florida Dept. of State)		
P10000021674		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporatio</i> its Articles of Incorporation:	n adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
SAME		The new
name must be distinguishable and contain the word "corporation," "company," or "inc. "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 5736	rporation	Cirde
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 5736 34. Mu	Corporations, Va	n lirele 33905
D. If amending the registered agent and/or registered office address in Florida, enter the	name of the	
Name of New Registered Agent State of New Registered Agent New Registered Office Address:	Cr. rida 2 32 (Zip Code)	905
New Registered Agent's Signature, if changing Registered Agent: Levely accept the appointment as registered agent. Lam familiar with and accept the obligations of the control of the con	itions 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 <math>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	PT John Doc	
-		
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name Address	. 010
1) Change	Pres Larry Ireland 11 3	8760 Hyde PKDL INNER
Add		
Remove	Pres Cindy Iseland 5736	Con son Atom Con
2)Change	thes Cindy Iseland 3736	Corporation Cir FI Mugus 3390
Remove		
3) Change		
Add		
Remove		
4) Change		
Add	· · · · · · · · · · · · · · · · · · ·	
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Damaua		

<mark>lf amending or adding additional Artio</mark> Attach <i>additional sheets, if necessary).</i>	
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If an amendment provides for an eyeh	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

Fhe date of each amendment(s) adoption	9.24-13
Effective date <u>if applicable</u> :	10-1-13
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) nt for approval.
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
by Larry Irclard	by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated9-	24-13
	or, president or other officer – if directors or officers have not been
	an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
	('indy Teclard
	(Typed or printed name of person signing)
	(Title of person signing)