## P1000038154

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Altra Service Profe	essionals, Inc.	
DOCUMENT NUM	P10000038156		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Robert J DeChello		
		Name of Contact Perso	n
	Altra Service Professionals, 1	nc.	
		Firm/ Company	
	815 NW 25th Ave Unit A	, mas company	
		Address	<del></del>
	Ocala, FL 34475		
		City/ State and Zip Cod	e
hah	d@altraservice.com		
		sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Robert J DeChello		888	551-5267 x101
. <u></u>		at (	)
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made p	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)
An Di P.C	neiding Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

FILED

Altra Service Professionals, Inc.

2018 AUG 29 PM 4: 51

( <u>Name of Corporatio</u>	
	on as currently filed with the Florida Dept. of State) EMETARY OF
000038156	on as currently filed with the Florida Dept. of State) E-METARY OF TALLAHASSE
<del></del>	ent Number of Corporation (if known)
suant to the provisions of section 607,1006, Florida Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the cor	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
Enter new principal office address, if applicable:	<u> </u>
incipal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BON	<u></u>
	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(Florida street address) . Florida

## 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>Addres</u> s
1) Change	<u>v</u>	Laurie M DeChello	815 NW 25th Ave Unit A
Add			Ocala, FL 34475
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
	_		
Add			
Remove			

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
<del>-</del>	
	and the second s
I an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indirected that contained in the antenament users.
(3,	

The date of each amendment(s) adoption:, 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
☐ 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.
8/27/2018 Dated
Signature DOM
(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)
Robert J DeChello
(Typed or printed name of person signing)
President
(Title of person signing)