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(((H24000325961 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 : (813)932-5244 Fax Number : (813)932-3782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: info@activatemylicense.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN ARTESIAN PLUMBING INC

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Page: 3 of 7

09/25/2024 12:30 AM

COVER LETTER

H240003259613

TO: Amendment Sec Division of Corp				
NAME OF CORPO	ARTESIAN P	LUMBING INC		
DOCUMENT NUM	BER: P10000070684			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following	g:	
	AMANDA JOHNS			
	CONTRACTORS REPO	Name of Conta ORTING SERV	act Person	INC
	13795 N Nebraska	Firm/ Con	npany	
	Tampa, FL 33613	Addre	:\$\$	
		City/ State and	l Zip Cod	2
	info@activatemy E-mail address: (to be us	license.com	il report n	otification)
For further informatio	n concerning this matter, pleas	se call:		
AMANDA JOHNS			(813)	932-5244
Name	of Contact Person	<u> </u>	Area Code	& Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Flori	ida Depar	tment of State:
☒ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)	,	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi	iling Address endment Section ision of Corporations Box 6327		Division	ddress nent Section of Corporations nire of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

From: AMANDA JOHNS

Fax: 18139325244

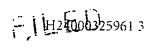
From: AMANDA JOHNS Fax: 18139325244 To: Docusign Envelope ID: 532CC630-93BA-4F1D-B724-E6E295CB3604

Fax: (850) 617-6380

Page: 4 of 7

09/25/2024 12:30 AM

Articles of Amendment to Articles of Incorporation of



2024 SEP 25 AM 11: 44

ARTESIAN PLUMBING INC	
(Name of Corporatio	on as currently filed with the Florida Dept. of State) i
210000070684	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	rporation:
ARTESIAN PLUMBING & AIR INC	The new
name must be distinguishable and contain the word "con" "Inc" or Co" or the designation "Corp." "Inc." "chartered." "professional association," or the abbrev	rporation." "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u> 	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>
	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX	ed office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX). If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX 1. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX 1. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX). If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:

Check if applicable

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

Example:

Fax: (850) 617-6380

Page: 5 of 7

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H240003259613

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.

X Change	<u>b1</u>	John Do	<u>oc</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
<i>δ</i>) Change		-		
Add				
Remove				

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Docusign Envelope ID: 532CC630-93BA-4F1D-B724-E6E295CB3604

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If amending or adding additional Articles, enter change(s) here:	H24000325961
Attach additional sheets, if necessary). (Be specific)	
	·
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchange, reclassification, or cancellation of issued s	hares,
provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate N/A)	<u> </u>
(a not appricable, indicate wa)	
	

From: AMANDA JOHNS Fax: 18139325244 Fax: (850) 617-6380 Page: 7 of 7 09/25/2024 12:30 AM Docusign Envelope ID: 532CC630-93BA-4F1D-8724-E6E295CB3604 H240003259613 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) 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 east for the amendment(s) was/were sufficient for approval (voting group) 09/24/2024 Dated

NEAL ERBES

Make

Signature

(Typed or printed name of person signing)

(By a director, president of 52953726E0482. - ... directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court

PRESIDENT

(Title of person signing)

appointed fiduciary by that fiduciary)