## P1100010322

(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	e #)		
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JUN 1 3 2014 T. CARTER

## **COVER LETTER**

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: TROY Plumbing + GAS, Inc.					
DOCUMENT NUMBER: P11000010322					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Anthony Lesten Name of Contact Person					
Troy Plumbing + GAS, Inc.					
3410 Sw Canoe Creck Tex.					
Palm City, FL 34900 City/State and Zip Code					
City/ State and Zip Code					
troy olumbinggas & Comcast net  E-mail address: (to be used for fulure annual report notification)					
For further information concerning this matter, please call:					
Anthony Leston at 772, 291-7790					
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  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section  Street Address Amendment Section					

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation of



TROY Plumbing +	Gas Inc.	14 JUN -3 PM 3: 49
(Name of Corporation as currently fil		te)
D1100010371		_
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corp	poration adopts the following amendment(s)
. If amending name, enter the new name of the co	rporation:	
ame must be distinguishable and contain the word		The new
Corp., " "Inc.," or Co.," or the designation "Corp, or the designation "Corp, or the designation "Corp, or the designation," or the designation, or the designation of the designation o	" "Inc," or "Co". A profession abbreviation "P.A."	
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BO)		A
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered of</li> </ol>		er the name of the
Name of New Registered Agent	N/n	<del></del>
	(Florida street address)	
New Registered Office Address:	_	_, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.		obligations of the position.
Signature of No.	w 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.

Mike Jones, V as Remo Example:	ve, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<b>V</b> P	Anthonylesten	3410 Sw Canoe Creek Joh. Palm Coty FL 34980
Remove			
2) Change	VP	LISA WEBER	3410 SW Canoe Creek Ten. Palm City, FL 34990
Add			Palm City FL 34990
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add Remove			
6) Change			,
Add			
Remove			

<u>II amendi</u> Attach <i>ad</i>	ng or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)	
	4/	
	10	
•		
		<del></del>
provision	ndment provides for an exchange, reclassification, or cancellation of issued shares, as for implementing the amendment if not contained in the amendment itself:	
(if no	ot applicable, indicate N/A)	
·	~ / /	
		-

The date of each amendment date this document was signed.		, if other than the
Effective date if applicable:	05/30/2014	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
action was not required.	s adopted by the messporators without shareholder action and shareholder	
Dated	05/30/2014	
Signature	1000	
(B <sub>2</sub>	y a director, president or other officer - if directors or officers have not been	<del>_</del>
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	