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JAN 20 2016

C LEWIS

#### **COVER LETTER**

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: The Plumber of SW Florida, Inc.						
DOCUMENT NUMBER: PH 0000 \$ 3991						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Debra Philips Name of Contact Person						
Plumber of S.W. Planda Firm/Company						
19531 Honey Boar Ln.						
N. Pt. Myers, Pt. 33917 City/ State and Zip Code						
Email address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Debra Ph. 11. ps at (239) 849-5937						
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  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  \$52.50 Filing Fee 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 to Articles of Incorporation



16 JAN 19 PH 4:43

The flum ber of SW Fluria (Name of Corporation as currently f	la, Inc.
PII 0000 8399 1	ned with the Piorida Dept. of State)
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
PLUMBER OF SW FLORI name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n q
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nja
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	9
(Florida street	address)
New Registered Office Address: (C)	(zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	n and accept the obligations of the position.
Signature of New Reg	istered 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones	NA	
X Add	<u>sv</u>	Sally Sr		,	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change	<u></u>	_	1		
Add					
Remove					-
2) Change					
Add					
Remove					
3 ) Change	·	_		<u> </u>	
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add		_			
Remove					

	icles, enter change(s) here: (Be specific)
nla	
	<del></del>
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
DI (M 1210112 TOT RUDIEUTEUTUS THE MILE	signification contained in the amendment fiseri.
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	1-10-16	, if other than th
Effective date if applicable:	010	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department of	not meet the applicable statutory filing requirements, f State's records.	this date will not be listed as th
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amen approval.	
	he shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by(vo	oting group)	# 15 F
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sha	َ مَنَّ مَ مَعَ fareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareho	older
Dated	Laype	
(By a director, presselected, by an income	esident or other officer – if directors or officers have no corporator – if in the hands of a receiver, trustee, or other ry by that fiduciary)	
	(Typed or printed name of person signing)	
In	cornorator/VPT	
	(Title of person signing)	