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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Patios Pools Driv	reways Inc	
DOCUMENT NUME	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Brad McConley		
		Name of Contact Person	1
	Patios Pools Driveways, In	ic.	
		Firm/ Company	
	10058 Spanish Isles Blvd	Ste F-7	
	, 	Address	
	Boca Raton, FL 33498		
		City/ State and Zip Cod	ů
bradb	oca1@gmail.com, loritann	er@ymail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	o concerning this matter, pleas	se call:	
Brad McConley		at (<u>561</u>	929-6161
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

18 JUL -6 PM12: 17

Articles of Amendment to Articles of Incorporation of

Patios Pools Driveways Inc.

(Name of Corporation as	currently filed with the Florida Dept. of State)	
P11000092135		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corpora	ation:	
n/a		The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp.," "In word "chartered," "professional association," or the abbre	nc," or "Co". A professional corporation name mus	ahbreviation t contain the
B. Enter new principal office address, if applicable:	n/a	
(Principal office address MUST BE A STREET ADDRES,	<u>(S</u>)	
	MARIA 201	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	
· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		를 바위되었다. 기계 기계 기
nla Name of New Registered Agent		2 S
Name of New Negaterea Agent		- PH-
	Florida street address)	- 2: - 33A
New Registered Office Address:	, Florida	- Na Long
	(City) (Ziq	Code)
New Registered Office Address:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	n Code)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am j	jaminar with and accept the obligations of the position	
	W. B. C. Harris V.	 -
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 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: XChange	<u>PT</u>	John Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) XX Change	VP	_	Brad McConley	21595 Coronado Ave
XX Add				Boca Raton, FL 33433
Remove				
2) Change		_		
Add				
Remove				
3) Change		-		
Add				
Remove				<u> </u>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
O CL-				
6) Change		_		
Add				
Remove				

If amending or	adding additional Articles, enter change(s) here:
(Attach addition	al sheets, if necessary). (Be specific)
	·
	**
	
If an amendm	ent provides for an exchange, reclassification, or cancellation of issued shares,
provisions for	implementing the amendment if not contained in the amendment itself:
(if not app	licable, indicate N/A)
- 	

The date of each amendment(s) adoption: The date this document was signed. Novimber 18, 2017, if other than the
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 shareholders. The number of votes east 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.
7/2/2018
Dated
Signature
(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)
Ron Barnea
(Typed or printed name of person signing)
tresident
(Title of person signing)