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Ad

R. WHITE AUG 1 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: POOL SERVICE	AMERICA INC.			
DOCUMENT NUMB					
The enclosed Articles of	of Amendment and fee are st	ibmitted for Jiling.			
Please return all corresp	ondence concerning this ma	uter to the following:			
	BYRON ESPIN				
-	Name of Contact Person				
1	POOL SERVICE AMERICA INC				
-		Firm' Company			
:	2980 WEST 84th STREET I	ЗАУ1			
Address					
1	HIALEAH GARDENS FL	33018			
-		City/ State and Zip Cod	e		
	@psapool.com E-mail address: (to be use concerning this matter, please	sed for future annual report se call:	notification)		
BYRON ESPIN			441-6444		
	· · · · · · · · · · · · · · · · · · ·	at () 441-0444		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dept	artment of State:		
■ \$35 Fitting Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amen Divisi P.O. I	ng Address Idment Section ion of Corporations Box 6327 ussec, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED

POOL SERVICE AMERICA INC. (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FL POOL SERVICE AMERICA INC. (Document Number of Corporation (if known) Pursuam to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NONE name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P. 4." 2980 WEST 84th STREET BAY I B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HIALEAH GARDENS, FL 33018 C. Enter new mailing address, if applicable: 8004 NW 154 STREET SUITE 605 (Mailing address MAY BE A POST OFFICE BOX) MIAMI LAKES FL 33016 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: NONE, SAME AS BEFORE. Name of New Registered Agent (Florida street address) New Registered Office Address: 1 New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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; \vec{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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Fitle</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Alu	N/A ALL THE SAME.	
Add			
Remove			
2) Change	ALH		
Add			
Remove			
3) Change	AB		
Add	1		
Remove			
4) Change	NA		
Add			
Remove			
IXCHIOAC	. 1		
51 Change	ALM		
Add			
Remove			
6)Change	4/4		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specifie)
PLEASE UPDATE / CHANGE FEI / EIN NUMBER TO : 82-5004435
THIS DOCUMENT IS TO UPDATE PRINCIPAL ADDRESS AND FEI/EIN NUMBER, ONLY.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, incheste N:A)
N/A

;

IMMEDIATELIY	2.2 1 1 1
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: /MMEDWTELY	
Effective date <u>if applicable</u> : <u>(MMED</u> 公でとり too 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 wildocument's effective date on the Department of State's records.	ill not be listed as the
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 jollowing 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 100%	
app <u>roval by 100% (voting group)</u>	
☐ 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. 	
Dated <u>08-09-18</u> . 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)	-
BYRON ESPIN	
(Typed or printed name of person signing)	
PRESIDENT!	
(Title of person signing)	

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Date of this notice: 03-30-2018

Employer Identification Number: 82-5004435

Form: SS-4

Number of this notice: CP 575 A

POOL SERVICE AMERICA INC 8004 NW 154TH ST STE 605 MIAMI LAKES, FL 33016

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 82-5004435. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120 03/30/2018

After our review of your information, we have determined that you have not filed tax returns for the above-mentioned tax period(s) dating as far back as 2016. Please file your return(s) by 04/14/2018. If there is a balance due on the return(s), penalties and interest will continue to accumulate from the due date of the return(s) until it is filed and paid. If you were not in business or did not hire any employees for the tax period(s) in question, please file the return(s) showing you have no liabilities.

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, Election by a Small Business Corporation.