## P12000070592

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Christian Brothers	Pool & Spa Care Inc.	
DOCUMENT NUMB	D12000070502		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Jerry Torix		
-		Name of Contact Person	1
	Christian Brother Pool & Spa	a Care Inc.	
•		Firm/ Company	
	PO BOX 381		
-		Address	
	Odessa, FL 33556		
-		City/ State and Zip Code	2
Ch-i-a			
Christ	ianBrothersPoolCare@gmail	.com sed for future annual report	
	E-mail address: (to be us	sed for future annual report	nouncation)
For further information	concerning this matter, pleas	se call:	
	, , , , , , , , , , , , , , , , , , ,		
Deborah Cheramie		at ( 727	517-5535
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

28 HAY 28 PM 3: 57 Christian Brothers Pool & Spa Care, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000070592 (Document Number of Corporation (if known) Pursuant 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: 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.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida 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.

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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones .	
X Add	<u>\$V</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		<del></del>		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change			***************************************	
Add				
Remove				
4) Change		<del>_</del>		
Add				
Remove				
5) Change	***************************************			
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
The only changes being made to this corporation at this time are as follows:	
The percent of ownership for the Vice President, Glen A Cheramie is being changed from 25% to 23%.	
The percent of ownership for the Secretary, Deborah L Cheramie is being changed from 25% to 27%.	
	-
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, indicate N/A)	

	May 26, 2015	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in this document's effective date on the D		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes afficient for approval.	cast for the amendment(s)
	proved by the shareholders through voting group each voting group entitled to vote separately or	
	for the amendment(s) was/were sufficient for ap	proval
by	(voting group)	.,,
•	(voting group)	
	opted by the board of directors without sharehold	ler action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder a	ction and shareholder
May 26, Dated	2015	
(By a select	lirector, president or other officer – if directors or d, by an incorporator – if in the hands of a receivated fiduciary by that fiduciary)	
аррон	• • • • • • • • • • • • • • • • • • • •	
	Deborah L Cheramie	
	(Typed or printed name of person sig	gning)
	Secretary	
	(Title of person signing)	