P12000075665

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Advanced Power Windows & Poor Locks Inc. DOCUMENT NUMBER: <u>P12000075665</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **△\$43.75** Filing Fee & □\$52.50 Filing Fcc □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

Advanced Power Windows	& Door locks Inc.					
(Name of Corporation as currently filed with the F	orida Dept. of State)					
P12000075665						
(Document Number of Corporation (if	(Document Number of Corporation (if known)					
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to					
A. If amending name, enter the new name of the corporation:						
Water Mania Pool & 500	of Miami Inc.					
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation ".	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the					
B. Enter new principal office address, if applicable:	8863 S.W. 200 Cane					
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Cutter Bay, FL. 33189					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8863 S.W. 200 Lane					
	Culter Bay, FL. 33189					
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 N/A	<u></u>					
N/A						
(Florida stre	eet address)					
New Registered Office Address: New Registered Office Address: City)	, Florida					
(Cay)	(Zip Code)					
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w						
N/A						
Signature of New Registered A	gent, 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>	<u>John E</u>	Ooc	
X Remove	<u>v</u>	Mike J	ones .	
X Add	<u>sv</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change	VP		Reinaldo Rosano	338 massachusetts
Add Remove				Ave. St. Cloud, FL. 34769
2) Change Add Remove	VP		Docar E. Arroyo	8863 6.W. 200 Lane Cutter Bay, FL. 33189
3) Change Add Remove		_		
4) Change Add				·
Remove 5) Change Add		_		
Remove 6) Change Add		_		
Remove				

E. <u>I</u>	f amending or adding additional Arti	icles, enter change(s) here:	
(<i>F</i>	Attach additional sheets, if necessary).	(Be specific)	
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F. <u>I</u>	f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
	provisions for implementing the ame	endment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)		
N	/A		
17	// `		
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The date of each amendment(s) adoption: September 30, a015 date this document was signed.	, if other than th
Effective date if applicable: September 30, 3013 (no more than 90 days after amendment file date)	_
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 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.	
Dated 9 30 13	
(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)	
OSCAY E. Arroy (O (Typed or printed name of person signing)	_
President (Title of person signing)	_
(True or herson signing)	