P13000037023

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COVER LETTER

Division of Corporations NAME OF CORPORATION: AquaticPro Pool Services, Inc. P13000037623 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MIGUEL J. RODRIGUEZ Name of Contact Person RODRIGUEZ/KINZBRUNNER CPAs, LLP Firm/ Company 1776 N PINE ISLAND ROAD, SUITE 216 Address PLANTATION, FL 33322 City/ State and Zip Code mjr@rkccpas.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MIGUEL J. RODRIGUEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: 35 Filing Fee □\$43.75 Filing Fee &. □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is **Certified Copy** enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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 tò Articles of Incorporation of



AQUATICPRO POOL SERVICES, INC.	
(Name of Corporation as currently filed with the I	Florida Dept. of State)
P13000037623	
(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:	
PIRATE POOLS, INC.	The new
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	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
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 office add new registered agent and/or the new registered office addres	
Name of New Registered Agent N/A	
(Florida st	réet,address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
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	Ageni, ij 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:	, ana sau	y Smitt, Sr as un Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>A'ddres</u> s
1) Change		N/A	
Add Remove			
2) Change	=		
Add Remove			
3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	N/A
	* - '
•	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(gins appricacie, muicue ma)	
	N/A

· · · · · · · · · · · · · · · · · · ·	, if other than the
date this document was signed.	
Effective date if applicable: NOVEMBER 11, 2013	
(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"	
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	
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)	
DANIEL RODRIGUEZ	
(Typed or printed name of person signing)	
PRESIDENT	·
(Title of person signing)	