## P13000053619

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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

_				
NAME OF CORPOR	ATION: Aquatic Reti	reats Swimming P	ools Inc.	
DOCUMENT NUMB	ER: P13000053	619		
	of Amendment and fee are su			
Please return all corresp	ondence concerning this ma	tter to the following:		
{	Curtis L. Holde	en		
-		Name of Contact Person	1	
	Aquatic Retrea	its Swimming	Pools Inc.	
_		Firm/ Company		
<u>.</u>	2107 College A	Ave E. Suite 5		
		Address		
!	Ruskin, Florida	33570		
_		City/ State and Zip Code		
cho	lden@tampab	ay.rr.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, please	se call:		
Curtis Holde	en	<sub>at (</sub> 813	295 0001	
Name of Contact Person		Area Co	de & Daytime Telephone Num	ıber
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:	
\$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	☐\$52.50 Filing Fee Certificate of Status	;

**Mailing Address** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

FILED

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SECRETARY OF STATE
ALLAHASSEE, FLORIBA

» <del>نيا</del>ر

## **Articles of Amendment** Articles of Incorporation of

Aquatic Retreats Swimming Pools	Inc.
(Name of Corporation as currently filed with the F) P1300053619	orida Dept. of State)
(Document Number of Corporation (if	(known)
•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation;	
1. 2:4:	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cover word "chartered," "professional association," or the abbreviation "Inc.,"	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	Aquatic Retreats Swimming Pools Inc
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	2107 College Ave E. Suite 5
	Ruskin, Fl 33570
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 addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	A 25 13 17 17 17 17 17 17 17 17 17 17 17 17 17
(Florida stre	eet address)
New Registered Office Address:	, Florida SS
(City)	(Zip Code) The State of State
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	28 0800
Signature of New Registered A	lgent, 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.

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)	Title	Name	<u>Addres</u> s
1) Change	V	Brett D. Foster	2107 College Ave E. Suite 5
Add			
X Remove			
2) Change	D	Travis A. Holden	5416 Twin Creeks Dr
X Add			Valrico, FI 33596
Remove			<del></del>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			ASS NET Y
5) Change		_	The R ITT
Add			
Remove			***
6) Change	<del></del>		
Add		<u>.</u>	
Remove		-	

. ,	(Be specific)
f an awardment provides for an aver	hange realessification or equalitation of insued shares
f an amendment provides for an exc provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exc provisions for implementing the amo (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) addate this document was signed.	September 20, 2013	, if other than the
Effective date <u>if applicable</u> :		
mappingue.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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	17	
	(voting group)	
action was not required.  The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder  pted by the incorporators without shareholder action and shareholder  ember 20, 2013	
(By a di sclected	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	<del></del>
	Curtis L. Holden	
	(Typed or printed name of person signing)	<del>.</del>
	President Presid	<u> </u>
	(Title of person signing)	