P13000067835

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



300252909063

11/04/13--01022--012 **35.00

TALL FILES SEE STATE

NOV = 8 2013 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: C&R Install	lations Services,	Inc.
	BER: P1300006783		
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	Ronald Lee Schw	vartz	
		Name of Contact Person	1
	C&R Installations	Services, Inc.	
	, , , , , , , , , , , , , , , , , , ,	Firm/ Company	
	1401 Maximilian	Ave.	
		Address	
	Spring Hill, Fl. 34	609	
		City/ State and Zip Code	e
الم الم	rana1@uahaa aa		
der —	orons1@yahoo.co		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Ronald Schwartz		at (352	, 5156336
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee FI 30314		2661 Evecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



C&R Installations Services, Inc.	13 NOV -4 ATTU: 16
(Name of Corporation as currently filed with the	
P13000067835	
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporate "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 MUST BE A STREET ADDRESS)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
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 Agem NIT	
(Florida st	reet address)
New Registered Office Address:	, Florida
(City.	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t <u>:</u> with and accept the obligations of the position.
a la	
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 Doc	
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>	Address
1) Change	V	Pat Collis	1401 Maximilian Ave.
Add			Spring Hill, Fl. 34609
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
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)
Christopher Barbee resigned as V and Pat Collis is now V. Please add the
EIN # 46-3406999
T. If an anomaly and the first state of the
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) n/a

· · · · · · · · · · · · · · · · · · ·	3105	
	3(*) October# 2013	
The date of each amendment date this document was signed	t(s) adoption: October 31, 2013	, if other than the
_	0ctober 1 , 2013	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated Oct	ober 4 , 2013	
Signature	Delra Schwart	
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Debra Schwartz	
	(Typed or printed name of person signing)	Quantities
	Secretary	
	(Title of person signing)	