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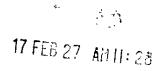


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALEX	PROFESSIONAL POOL SERVICES CORP
DOCUMENT NUMBER: P14000008	
The enclosed Articles of Amendment ar	nd fee are submitted for filing.
Please return all correspondence concer-	ning this matter to the following:
ALEXIS FERNA	NDEZ
	Name of Contact Person
ALEX PROFESS	SIONAL POOL SERVICES CORP
	Firm/ Company
14738 SW 92ND	• •
 .	Address
MIAMI FL 3319	6
	City/ State and Zip Code
ACOSTAESTEVEZAG	CCT@GMAIL.COM
	sss: (to be used for future annual report notification)
For further information concerning this a	·
	at (786) 2123177 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following an	ount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Fil Certificate	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

Articles of Amendment to Articles of Incorporation of



ALEX LANDSCAPING AND POOL SERVICES CORP

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following the Articles of Incorporation: A. If amending name, enter the new name of the corporation: ALEX PROFESSIONAL POOL SERVICES CORP name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must 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)	The second
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(Principal office address <u>MUST BE A STREET ADDRESS</u>) ——————————————————————————————————	abbreviation
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	v Code)
(CHy) (ZI _I	Coue
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	
t hereby accept the appointment as registered agent. I am jumitar with and accept the offigations of the position.	•
Signature of New Registered Agent if changing	<u> </u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil document's effective date on the Department of State's records.	l not be listed as the
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)	
(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 ~ // // // // 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)	
ALEXIS FERNANDEZ	
(Typed or printed name of person signing)	
\sim 1	
Prise Lint	
(Title of person signing)	