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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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JUN - 9 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Brunswick	Pool Services In	ic
	BER: P1400003288		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Lilli Brunswick		
		Name of Contact Person	1
	Brunswick Pool S	Services Inc	
		Firm/ Company	
	6177 Vista Linda	Lane	
		Address	
	Boca Raton, FL 3	33433	
		City/ State and Zip Code	e
jan	d592040@aol.coi	m	
<u> </u>		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se cull:	
Lilli Brunswid	k	_{at (} 561	, 843 1839
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or 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 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	
i unanasoo, i D JzJiT		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

14 E Y 27 11 12: 43

Brunswick Pool Services Inc	IALLANASSET TE ESTA	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P14000032883	•	
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new name of the corporation:	The new	
name must be distinguishable and contain the word "corporati" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	9045 La Fontana Blvd, STE 207	
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33434	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9045 La Fontana Blvd, STE 207	
intuming dualess man bear obtained box	Boca Raton, FL 33434	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	idress in Florida, enter the name of the	
(Florida :	street address)	
New Registered Office Address:	Florida	
(Cit	(7) (Zip Code)	
New Registered Agent's Signature, if changing Registered Ager		
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.	
Signature of New Registere.	d 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:

 $P = President; V = Vice President; T = Treasurer; S \cdot Secretary, D = Director; TR : Trustee, C = Chairman or Clerk, CEO = Chief Executive Officer, CFO :: Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Doc	
X Remove X Add	<u>y</u> <u>sv</u>	Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add Remove			
2) Change			
Add			
Remove			
3) Change			
Add Remove			
4) Change			
Add	1-		
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary)	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
unte uns document was signed.		
Effective date if applicable:	·	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval	
	proved 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	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
DatedS	122/14	
Signature	Harman	
selecte	irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	_
	(Title of nerson signing)	

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