P14000052421

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15 JUN 22 AM 8: 36

SECRETARY OF STATE DIVISION OF CORPORATIONS

7-1-15 CLEWB

COVER LETTER

TO: Amendment Section Division of Corporat				
NAME OF CORPORATE DOCUMENT NUMBER	TION: Emperi	al Plumbi 00052421	ng Inc	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this mat	tter to the following:		
be	Beth EZT 2975 Saras the ez-	Firm/ Company See Address Address City/ State and Zip Code	Lge Rd #D L 34239	
For further information concerning this matter, please call:				
Beth	Stone	at (941	923-8290	
Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department 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)	
· · · · · · · · · · · · · · · · · · ·	g Address	Street	Address	

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

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

Articles of Amendment

to

Articles of Incorporation

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Emperial	Plumber	$\frac{1}{2}$	15 JUN 22	AM 8: 36
(Name of Cor	poration as currently f	iled with the Florida De	ept. of State)	
P1400				
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation	adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of	f the corporation:			
				_ The new
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co	". A professional corpo		abbreviation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				
				
C. Enter new mailing address, if applicable				
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u>)			
D. If amending the registered agent and/or		s in Florida, enter the n	ame of the	
new registered agent and/or the new regi	stered office address:			
Name of New Registered Agent			<u>.</u>	_
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(Ci	ity)	(Zip	Code)
New Registered Agent's Signature, if changi	ng Registered Agent:			
I hereby accept the appointment as registered a	agent. I am familiar with	h and accept the obligation	ons of the position.	
	Signature of New Reg	istered Agent, if changing	g	

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 <math>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> <u>John I</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones .	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One) 1) Change Add Remove	Title V	Charles Henry	Address 5004 Bonnet AVE North Port, FL 34286
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
 	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	SECOND FILES
Effective date if applicable:	DIVISION OF GORPORATIONS
(no more than 90 days after amendment file date)	15 IIII 20
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	15 JUN 22 AM 8: 36 s, this date will 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 by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 shaction was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required.	older
Dated 6-18-15 Signature Edward Durkes.	
Signature Edward Dukes.	
(By a director, president or other officer – if directors of officers have r	
selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	iner court
Edward Dukes Jr	
(Typed or printed name of person signing)	
President	
(Title of person signing)	