# P1500005277

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: \_\_ JDM Plumbing, Inc. DOCUMENT NUMBER: P15000005277 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carlos Robaina Name of Contact Person JDM Plumbing, Inc Firm/ Company 10014 Boynton Place Circle, STE 214 Address Boynton Beach, FL 33437 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carlos Robaina Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee **■**\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

(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
Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

### Articles of Amendment to Articles of Incorporation of

JDM Plumbing, Inc.				
(Name o	f Corporation as currently	filed with the Florida Dept. of State)		
P15000005277				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	Torida Profit Corporation adopts the follo	wing amer	ndment(s)
A. If amending name, enter the new na	me of the corporation:			
N/A			T1	
	ation "Corp." "Inc." or "C	" "company," or "incorporated" or the corporation name mile.A."	e abbrevio	
B. Enter new principal office address, (Principal office address MUST BE A ST		N/A		_
<ul> <li>C. Enter new mailing address, if appliance (Mailing address MAY BE A POST of the Mailing address).</li> <li>D. If amending the registered agent and new registered agent and/or the new registered.</li> </ul>	OFFICE BOX) d/or registered office addre	N/A  ess in Florida, enter the name of the	15 JUN -8 PN 2:	LS 36 A WALDARS I LA SECHE LA
Name of New Registered Agent	N/A		24	ATE
New Registered Office Address:		, Florida	Zip Code)	_
New Registered Agent's Signature, if cl I hereby accept the appointment as regist		ith and accept the obligations of the position	on.	
	Signature of New Re	gistered Agent. if changing	<del></del>	

## 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>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Jorge Pertierra	6270 Coolidge St.
xx Add			Hollywood, FL
Remove			33024
2) Change	D	Carlos Robaina	10014 Boynton Place Circle
xx Add			STE 214, Boynton Beach
Remove			FL 33437
3) Change			UN CRETA
			—————————————————————————————————————
Add			<u>구 되는 기</u>
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			RIDA 24
Add			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change		_	
Add			
Remove			

L. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)	-			
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If an amandment provides for an evalua	.alaggiffactio-	on consultation of	Normal above		
<ul> <li>If an amendment provides for an excha provisions for implementing the amend</li> </ul>	ment if not contains	d in the amendme	ent itself:		
(if not applicable, indicate N/A)					
Paul A. Simpson, 30 % of shares					
orge Pertierra, 60% of shares					
Carlos Robaina, 10% of shares					
				··	
		*			

The date of each amendment(s) adoption:	, if other than the
6-2-2015	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	SECRETAR TALLAHASS
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
0/2/2013	ED ST OF ST TETTLO
	TATE DRIDA
(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)	_
(Typed or printed name of person signing)	
(Title of person signing)	