# P15000011157

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DIVISION OF COM ONSTITUTE

JUN 1 5 2017 C MCNAIR

## **COVER LETTER**

J & M HEATING AND AIR CONDITIONING INC

**TO:** Amendment Section Division of Corporations

DOCUMENT NUMBI	ER:	P15000011157			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		JANET REATEGUI			
_		Name of Contact Person	1		
	J & M HEATING AND AIR CONDITIONING INC				
<del>-</del>	Firm/ Company				
	186	2 SW HICKOCK TERRAC	CE		
_		Address			
	PC	ORT SAINT LUCIE, FL 34	953		
_		City/ State and Zip Code	2		
		jnmheatingac@gmail.com			
<del></del>	E-mail address: (to be us	sed for future annual report			
For further information	concerning this matter, pleas	se call:			
JANE'	ΓREATEGUI	954 at (	439-0473		
Name of	Contact Person	Area Coo	) de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssec, FL 32301		

# Articles of Amendment to Articles of Incorporation

# J & M HEATING AND AIR CONDITIONING INC

### (Name of Corporation as currently filed with the Florida Dept. of State)

### P15000011157

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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)	
B. Enter new principal office address, if applicable:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>
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 N/A	_
(Florida street address)	<del></del>
New Registered Office Address: , Florida , Florida	
	ip Code)

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	Y	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	D	ARTHUR P. WILLIS	1862 SW HICKOCK TERRACE
Add			PORT SAINT LUCIE, FL 34953
X Remove			
2) Change	D	MICHAEL ROTH	1862 SW HICKOCK TERRACE
X Add			PORT SAINT LUCIE, FL 34953
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
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)		
N/A		
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CONTRACTOR		
75 - 77 - 78 - 78 - 78 - 78 - 78 - 78 -		
·*************************************		
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
I/A		
	<del></del>	
March Render de Control de Contro		
et and the state of the state o		

	N/A	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
. · · N/A		
Effective date if applicable:		· · ·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wit partment of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	MAY 18, 2017	
Signature	ect Rale Qui	
(By al di	rector, president or other officer) if directors or officers have not been	
Selected	l, by an inemporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
арропп	ed Indiciary by that indiciary)	
	JANET M. REATEGUI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>

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