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15 JUL -1 AH 10: 51

SEGRETARY OF STATE

JUL 9 2015 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

ER PLUMBING & AI	R CONDITIONING	S INC.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submi	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
RONI ELGAZAR			
(1	Name of Contact Per	rson)	
ER PLUMBING & AIR CONDITIONING INC.			
	(Firm/ Company))	
8373 W 26TH AVENUE			
	(Address)		
HIALEAH, FL 33016			
(0	City/ State and Zip C	Code)	
BILLING@ERPLUMBINGANDAIR.COM			
E-mail address: (to be used f	or future annual repo	ort notification)
For further information concerning this matter, please ca	all:		
RONI ELGAZAR		954-682-9977	
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Florida D	epartment of S	State:
\$35 Filing Fee \$\Bigcup \$\subset\$\$\$\$\$\$\$\$\$ Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address endment Secti ision of Corpo ton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED
SEGRETARY OF STATE
DIVISION OF CORPORATIONS

15 JUL -1 AM 10: 51

ER PLUMBING & AIR CONDITIONING INC.

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000011545	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
name must be distinguishable and contain the worn "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	The new corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u></u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signi	ature of New Registered 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 = 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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	0	ALYEK REYES	_
Add			
X Remove			
2) X Change	<u>P</u>	SHARONA ELGAZAR	11352 W STATE RD 84
Add			SUITE 37
Remove			DAVIE, FL. 33325
3) Change			
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)		
PLEASE ADD OUR COMPANY FEI#		
OUR COMPANY FEI# IS 47-3061355		
-		
F. If an amendment provides for an exchange, reprovisions for implementing the amendment	if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	FILE Fother, than the
date this document was signed.	SECRETARY OF CORPORATION
JUNE 1, 2015 Effective date <u>if applicable</u> :	AM ID: 51
(no more than 90 days after a	mendment file date) 15 JUL MILL
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, 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 volume by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gr must be separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	r approval
by	
by(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	holder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	er action and shareholder
JUNE 23, 2015	
Dated	_
Signature	
(By the chairman or vice chairman of the board, have not been selected, by an incorporator – if	in the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary	y)
RONI ELGAZAR	
· (Typed or printed na	ime of person signing)
PRESIDENT	