## P15000012677

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PABLO'S POOL S	ERVICES INC	<del></del>
	BER: P15000012677		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	JUAN P LEANOS		
		Name of Contact Person	
	<u> </u>	Firm/ Company	
	1797 53RD LN SW		
		Address	
	NAPLES FL 34116		
		City/ State and Zip Code	:
	PABLO_LEANOS@HOTM	AIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
JUAN P LEANOS		at (	692-4786
Name (	of Contact Person	Area Coo	_)
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S42 75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee S. Monroe Street, Suite 810 assee, F1, 32303

## Articles of Amendment to Articles of Incorporation οſ

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PABLO'S POOL SERVICES INC	
(Name of Corporation as gurrently	y filed with the Florida Dept. of State)
P15000012677	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	202
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	<u> </u>
	8
	- <del> </del>
D. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the
new registered agent and/or the new registered office address:	<u>:</u>
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>
I hereby accept the appointment as registered agent. I am jumiliar w	with and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
Check if applicable	

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 = Secre ary; 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: Currenty 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 Doe</u>	
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>	Address
1) Change	P	CLAUDIA ROCA	1797 53RD LN SW
X Add			NAPLES FL 34116
Remove			
2) Change			
Add			<u> </u>
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

IN DD DC HNESM	al sheets, if nece.		pecific)				
D PRESIDENT							
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lf an amendoo	ent provides for	an exchange.	reclassifica	tion, or cance	ellation of issu	ied shares.	
provisions for	r implementing	the amendmei	nt if not cor	tained in the	amendment i	tself:	
(if not app	olicable, indicate	N/A)				<del>.</del>	
						<u> </u>	
·	<del></del>					ş. <del>.</del>	
							<del></del>

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	
	tho more than 90 days after amenament file date	,
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirement Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without shareh	older action and shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the an sufficient for approval.	iendment(s)
	approved by the shareholders through voting groups. The followifor each voting group entitled to vote separately on the amendment	
"The number of votes ea	ist for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selec	director, president or other officer – if directors or officers have sted, by an incorporator – if in the hands of a receiver, trustee, or	
арро	inted fiduciary by that fiduciary)	
	JUAN P LEANOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	