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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: PLUMBING TROO	OPERS INC		
DOCUMENT NUMBI		<u>.</u>		
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the followir	л б :	
E	BIBIANA HODGETTS			
_		Name of Conta	act Person	
ī	IODGET & CALVACHE A	CCOUNTING CI	PAINC	
_		Firm/ Con	npany	
S	403 NW 20TH PLACE			
_		Addre	55	<u> </u>
	CORAL SPRINGS, FL 3307]		
-		City/ State and	Zip Code	
HODG	ETCALVACHE@GMAIL (СОМ		
	E-mail address: (to be us	sed for future annu	al report	notification)
For further information	concerning this matter, pleas	se call:		
BIBIANA HODGETTS	s ′	/	954	825-6360
Name of	Contact Person	at (Area Coo	825-6360 de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Flo	rida Depa	riment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Centified Cor	рy	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 massec, FL 32314		Amend Divisio Clitton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle (1880), FL 32301

Articles of Amendment to Articles of Incorporation of

PLUMBING TROOPERS INC

				<u> </u>
(<u>Name o</u>	of Corporation as curren	tly filed with the Florida Dept. of Sta	<u>te</u>)	
	P15000070	150		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes. thi	s Florida Profit Corporation adopts th	e following	amer
A. If amending name, enter the new na	me of the corporation:			T'
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation no		
B. Enter new principal office address,	if annlinghlar	LINA KURUCZ		
(Principal office address MUST BE A S		1536 SW 13 CT	250 250	919
		POMPANO BEACH, FL 33069	<u> </u>	SEP 2
C. Enter new mailing address, if appli	cable:		13. 13.	9
(Mailing address MAY BE A POST				P
				25
			• -	5
D. If amending the registered agent an new registered agent and/or the new		2887	<u>ıc</u>	<u> </u>
Name of New Registered Agent	8403 NW 20TH PLACE			
		street address)	· · · ·	
New Registered Office Address:	CORAL SPRINGS, FL	, Florid	33071 a	
		(City)	(Zip C	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familia	nt: r with and accept the obligations of the Registered Agent, if changing	position.	:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed	and ti
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:	1
P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or	Clerk
Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the firs	

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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. P. Mike Jones V as Remove, and Sally Smith. SV as an Add.

Mike Jones, V as Rem Example:	ove, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	LINA KURUCZ	1536 SW 13TH CT
X Add			POMPANO BEACH, FL 330
Remove			
2) Change	VP	ZOLTAN KURUCZ	1536 SW 13TH CT
X Add			POMPANO BEACH, FL 330
Remove			
3) X Change	<u>S</u>	MICHAEL RAMOS	8233 GATOR LANE #25
Add			WEST PALM BEACH, FL 3
Remove			
4) Change	P	PAI. KURUCZ	1536 SW 13TH CT
Add			POMPANO BEACH, FL 330
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	r adding additional A ual sheets, if necessary) (Be specific)			
			•		
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fan amandn	ent provides for an ex	rehange roelassifie	eation or cancellati	ian of issued shares	ı
provisions fo	r implementing the ar	<u>mendment if not co</u>	ntained in the ame	ndment itself:	l
(if not ap	plicable, indicate N/A)	ı			ı
					·
					
•				, <u>-</u>	·
	.			<u> </u>	
					

	SEPTEMBER 20, 2019	
	nt(s) adoption:	. if
date this document was signe	rd. ∖	
	SEPTEMBER 20, 2019	
Effective date <u>if applicable</u>		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	ot b
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	were sufficient for approval.	
	rere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	
"The number of vot	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	ļ
•	(voting group)	١
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder	
	SEPTEMBER 23, 2019	
Signature	LANA KURUCZ	
'	(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)	-
	LINA KURUCZ	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	十