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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: OVERSEAS PLU	MBING INC.			
DOCUMENT NUM	BER:				
The enclosed Articles	of Amendment and fee are si	abmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	FRANK VELTRI				
	Name of Contact Person				
	OVERSEAS PLUMBING INC.				
	Firm/ Company				
	P.O. BOX 1323				
		Address			
	TAVERNIER, FL 33070				
		City/ State and Zip Code	:		
1872	elks@gmail.com				
	E-mail address; (to be u	sed for future annual report	notification)		
For further information Frank Veltri, Presider	n concerning this matter, pleas		, 379-1080		
Name of Contact Person			le & Daytime Telephone Number		
	r the following amount made				
☑ S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section			
P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation of

OVERSEAS PLUMBING INC.			
(Name)	of Corporation as currently	filed with the Florida Dept, of Stat	<u>e</u> 1
P15000099995			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006. Florida Statutes, this F	<i>lorida Profit Corporation</i> adopts the	following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "C ition," or the abbreviation "F	o", A professional corporation nar	ne must contain the
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS)	345655W 187" Homestead, Fr. 3	<u> Caler, L</u> unt 3 13034
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)			# FIL
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	E.D
Name of New Registered Agent	FRANK VELTRI		
	34555 SW 187 COURT, US	SIT 37	
	(Florida stree	rt address)	
New Registered Office Address:	HOMESTEAD	. Florida	33034
	10	iiy)	(Zip Coder
New Registered Agent's Signature, if cl			
I hereby accept the appointment as regist	ered agent Lam familiar wi 7 - 1	th and accept the obligations of the p	osition.
	_ 40		
	Signature of New Reg	gistered 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, it necessary)

Please note the officer director title by the first letter of the office fitle:

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 tollowing 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>7.</u>	Mike Jones		
X Add	\underline{SV}	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	JAMES CONROY	121 NAVAJO ST.	
Add			TAVERNIER, FL 33070	
X Remove				
2) Change	SEC	ISABEL CONROY	121 NAVAJO ST.	
Add			TAVERNIER, FL 33070	
X Remove				
3) Change	SEC	BRENDA THOMPSON COCKRELI	P.O. BOX 1323	
XAdd			TAVERNIER, FL 33070	
Remove				
4) Change	DIR	KAREN R. GEORGE	34653 SW 187 PL	
X Add			HOMESTEAD, FL 33034	
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)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
CANCELLATION OF SHARES OF REMOVED OFFICERS; VICE PRESIDENT: JAMES CONROY AND
SECRETARY ISABEL CONROY
fresident Frank Veiter to hold all 100% of shares

. . . .

The date of each amendment(s) adopt	OCTOBER 27, 2018
date this document was signed	tion: if other than the
<u>u</u>	BER 27, 2018
	(no more than 90) days after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart	c does not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was were adopted by the shareholders was were suffici	f by the shareholders. The number of votes east for the amendment(s) ent for approval.
☐ The amendment(s) was/were approvious the separately provided for each	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
"The number of votes east for t	the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
OCTOBER 27.	2018
Dated Signature	ALL
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
FR.	ANK VELTRI
·	(Typed or printed name of person signing)
PRI	ESIDENT
- -	(Title of person signing)

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