## P16000015712

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AUG 17 2016 C LEWIS

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: \_\_\_\_ San Juan Pools & Spas, Inc P16000015712 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Diane Krick Name of Contact Person San Juan Pools & Spas, Inc Firm/Company 1408 SE 17th Ave, Ste E Address Cape Coral, FL 33990 City/ State and Zip Code sanjuanpsinc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239 ) 677-6733

Area Code & Daytime Telephone Number Diane Krick Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILEL SECRETARY OF STATI QIVISION OF CORPORATION:

2016 AUG -8 PM 2: 29

## Articles of Amendment to Articles of Incorporation of

San Juan Pools & Spas, Inc (Name of Corporation as currently filed with the Florida Dept. of State) P16000015712 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 of fice address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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)

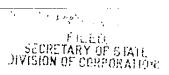
Please note the officer/director title by the first letter of the office title:

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)	Title	Name	<u>Addres</u> s	
1) Change	<u>s</u>	Rebecca Rose Schwandt	3101 Alafaya Bay Lane	
X Add			Orlando, FL 32817	
Remove				
2) X Change	VT	Diane Lynn Krick	710 SE 8th Pl	
Add			Cape Coral, FL 33990	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	<u> </u>



The date of each amendment(s) adoption:date this document was signed.	2016 AUG -8 PM 2: 2 of other than the
Effective date if applicable:	
(no more than 90 d	days after amendment file date)
Note: If the date inserted in this block does not meet the applicate document's effective date on the Department of State's records.	ole statutory 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 n by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vo	
"The number of votes cast for the amendment(s) was/were	sufficient for approval
by	
☐ The amendment(s) was/were adopted by the board of directors w action was not required.	ithout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators withou action was not required.	at shareholder action and shareholder
8/3/16 Dated	
Signature Cincle Signature (By a director, president or other officer	r – if directors or officers have not been nands of a receiver, trustee, or other court
Diane Lynn Krick	
(Typed or printed na	me of person signing)
Vice Presid	dent Treasurer
(Title of	person signing)