Plocaco 16570

(Re	questor's Name)	
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(City	y/State/Zip/Phone i	*)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	<u> </u>
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TALLAHASSPELFLORIDA

SEP 1 9 2017 S. YOUNG



FLORIDA DEPARTMENT OF STATE | Division of Corporations

RECEIVED 17 知 网 聯 企 網

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALL AHASSEE, FLORIDA

August 29, 2017

ORWIN BAEZ
HYDRA-TECH PLUMBING, INC
2850 W 80TH STREET UNIT 209
HIALEAH, FL 33018

SUBJECT: HYDRA-TECH PLUMBING INC.

Ref. Number: P16000016570

We have received your document for HYDRA-TECH PLUMBING INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 917A00017803

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Hydra-	Tech Flumbing. Inc.
DOCUMENT NUMBER: 7160000	(6570
The enclosed Articles of Amendment and fee	
Please return all correspondence concerning th	
Owin Br	Name of Contact Person Mumbing. Tre. Firm/ Company L ST, Unit 209 Address C 33018 City/ State and Zip Code techplumbing.com be used for future annual report notification)
- 0 1	Name of Contact Person
Hudra-Tech	Mumbine. Inc.
	Firm/ Company
2850 W 80	H ST. Unit 209
	Address
Hialeah, #	L 33018
	City/ State and Zip Code
agui a Chuda	teal of mhine com
E-mail address: (to	be used for future annual report notification)
	,
For further information concerning this matter	please call:
Orwin Baez	at (786) 312-4273
Name of Contact Person	at (<u>786</u>) <u>312-4273</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount in	nade payable to the Florida Department of State:
	& S43.75 Filing Fee & S52.50 Filing Fee letter; payment had us Certified Copy Certificate of Status been Submitted.
S35 Filing Fee S43.75 Filing Fee Certificate of Stal	us Certified Copy Certificate of Status
	(Additional copy is Certified Copy
	enclosed) (Additional Copy is enclosed)
	is the lost of
Mailing Address	Street Address Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, Fl. 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Hydra-lech Mumbing.	fire.	
Hydra-lech Mumbing.	rporation as currently filed with the Florida Dept. of State)	1
P16000016570		
1140000(14976	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fo	ollowing amendment(s
A. If amending name, enter the new name	 of the corporation:	
		en.
	the word "corporation," "company," or "incorporated" or "Corp," "Inc," or "Co". A professional corporation name or the abbreviation "P.A."	
B. Enter new principal office address, if ap		
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)	
 C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new reg 	registered office address in Florida, enter the name of the	FILED 17 SEP 19 PH 2: 55 SECRETARY OF STATE MALLANASSEE: FLORIDA
		١٥ جيو
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida_	
	(City)	(Zīp Code)
New Registered Agent's Signature, if chang		*.*
t nervny accept the appointment as registered	agent. I am familiar with and accept the obligations of the po:	Milon.
	Signature of New Registered Agent, if changing	

Please note the officer/dir P = President; V= Vice i				rustee; C = Chairman or Clerk, CEO + Chief
Executive Officer; CFO :	= Chief F	inancial O	fficer. If an officer/director holds more t	han one title, list the first letter of each office
held. President, Treasure.				DOT I APE . f f . C I Ab . D . Th f
				PST and Mike Jones is listed as the V There is should be noted as John Doe, PT as a Change,
Mike Jones, V as Remove				
Example:				
X Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jone	!! \$ 	
X Add	<u>sv</u>	Sally Smit	\ <u> </u> 	
Type of Action (Check One)	<u>Title</u>	7	 <u> ame</u> 	<u>Addres</u> s
1) Change	_5_		John M. Almeida	1150 west 37th Terrace Hialeah, FL 33012
Add				Hialeah, FL 33012
Remove				
2) Change			П	
Add				
Remove				
3) Change				
Add				
Remove				,,,,,
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		- -		· ··· · · · · · · · · · · · · · · · ·
Add		:		
			I I	

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)

__ Remove

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
••	
· · · · · · · · · · · · · · · · · · ·	
	11
	<u> </u>
	∮
	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Please cancel John 4	Almeida's 10% of the company's shares; and
re-distribute as follow:	
re-cistribute as follow:	
	<u> </u>
Orwin Baez President	50%
Jose M. Almeida, VP	50%
GUDE M. MIMEIDA, VP	
Thank You!	
	<u> </u>

The date of each amendment(s) adoption: _ date this document was signed.	, if other than the
Effective date if applicable:	
Elicetive date trapparease.	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the fi State's records.
Adoption of Amendment(s) (C	HECK ONE)
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendment(s) approval.
	he shareholders through voting groups. The following statement
"The number of votes cast for the ame	 endment(s) was/were sufficient for approval
by	
(N	ding group)
☐ The amendment(s) was/were adopted by the action was not required.	
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated <u>89/15/2017</u>	
Signature	
(By a director, pro	sident or other officer - if directors or officers have not been
selected, by an in-	orporator – if in the hands of a receiver, trustee, or other court
appointed fiducia	by that fiduciary)
	Win Pacz (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)