## P160000320861

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section ... Division of Corporations

NAME OF CORPORA	TION: INFINITY POOL	& LAWN, INC.				
DOCUMENT NUMBE	R: P16000020861					
	*Amendment and fee are su	bmitted for filing.				
Please return all correspo	ondence concerning this ma	tter to the following	ng:			
		ARLI DE AL	MEIDA			
_		Name of Conta	act Person	1		
	n	NFINITY POOL &	& LAWN	, INC.		
<del></del>		Firm/ Con	npany	• • • • • • • • • • • • • • • • • • • •		
	306 LAS PALMAS ST					
_		Addre	ss			
:	ROYAL PALM BEACH, FL 33411					
<del>-</del>	City/ State and Zip Code					
	CAR	LOS@CASTANE	EDACPA	.COM		
· · · · · · · · · · · · · · · · · · ·	E-mail address: (to be us	sed for future annu	al report	notification)		
* 6 A	·			•		
For further information of	oncerning this matter, pleas	se call:				
ARLI DE ALMEIDA		at (	561	234-8066		
Name of	Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallaharsee, FL 32314			Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

INFINITY POOL & LAWN, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State)

P16000020861

(Document Number of Corporation (if known)

DIEDUTY D & I DIC	ion:
INFINITY P & L, INC.	The n
	poration," "company," or "incorporated" or the abbreviat ;" or "Co". A professional corporation name must contain iation "P.A."
B. Enter new principal office address, if applicable:	306 LAS PALMAS ST
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	ROYAL PALM BEACH, FL 33411
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	306 LAS PALMAS ST
	ROYAL PALM BEACH, FL 33411
D. <u>If amending the registered agent and/or registered offi</u>	an address in Florida, entar the name of the
	ce aduress in Florida, enter the name of the
new registered agent and/or the new registered office a	address:
new registered agent and/or the new registered office a  Name of New Registered Agent	address:
new registered agent and/or the new registered office a	address:
new registered agent and/or the new registered office a  Name of New Registered Agent	orida street address)
Name of New Registered Agent  (Flo	orida street address)
new registered agent and/or the new registered office a  Name of New Registered Agent	address:
Name of New Registered Agent  (Flo	orida street address) , Florida
Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing Registered	orida street address), Florida (City) (Zip Code)  Agent:
New Registered Agent's Signature, if changing Registered	orida street address), Florida (City) (Zip Code)  Agent:
Name of New Registered Agent  (Flo	orida street address), Florida (City) (Zip Code)  Agent:

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 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.

Example: X_Change	<u>PT</u>	John De	<u>oe</u>				
X Remove	<u>v</u>	Mike Jo	<u>ones</u>				
X Add	<u>sv</u>	Sally Si	mith				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s		
1) Change		_		 <del></del>			
Add						•	٠.
2) Change		_		 			
Add							
Remove							<u></u>
3) Change		_		 			
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4) Change		_		<del></del>			
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5) Change		_		 <u></u>			
Add							
Remove					<u>.</u>		
6) Change							
Add		<del></del>					
Remove						,	

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	· ,
·····	
f an amendment provides for an exchange, reclassification, or cancellation	ion of issued shares,
provisions for implementing the amendment if not contained in the ame (if not applicable, indicate N/A)	endment itself:
(y not approache, marcare 1971)	
•	
•	

Fhe date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehol action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature  (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 co appointed fiduciary by that fiduciary)	
ARLI DE ALMEIDA	
(Typed or printed name of person signing)	
President/Director	

(Title of person signing)