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17 IL ELD 2024 AUG -7 PM 2: 19 SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: +Amily 00015 06 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Address 3423 CHICER FIFAMILY POOLS. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

> Certified Copy (Additional copy is

enclosed)

Mailing Address

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

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status

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Articles of Amendment

to

Articles of	`Incorpoi	ation
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ramily pools of t	10COA 1	NC	Dant of State 4 Alla
	2035956	ned with the Florida i	Dept. of State 4 AUG - 7
		Corporation (if known)	AIFANY
Pursuant to the provisions of section 607.1006, Florid		•	n adopts the following ams
ts Articles of Incorporation:			
s. If amending name, enter the new name of the c	orporation:		
			The
ame must be distinguishable and contain the word "c 'Inc.," or Co.," or the designation "Corp." "Inc, 'chartered," "professional association," or the abbr	" or "Co". A p	npany," or "incorporat professional corporatio	ed" or the abbreviation "Co. on name must contain the v
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADd			
The purple duries have be a street and	<u> 74255</u>)		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BC	<u>)X</u>)		
		-	
 If amending the registered agent and/or registered new registered agent and/or the new registered 		s in Florida, enter the	name of the
Name of New Registered Agent			
Name to New Registered Agent			
	(Florida street	address)	
New Registered Office Address:			. Florida
The state of the s	(C	îty)	(Zip Code)
Sew Registered Agent's Signature, if changing Reg	gistered Agent:		
hereby accept the appointment as registered agent.	l am familiar wit	h and accept the obliga	tions of the position.
Sign	ature of New Reg	istered Agent, if changi	ng

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P	_	Paul Lautenschlager	1810 Shelburne In
× Add				SArASOHA FL 34231
Remove				
2) Change		_		
Add				****
Remove 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).	(Re specific)
, ,	
	
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	-
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
-	
_	

The date of each amendment(s) adoption: $\frac{8}{1/24}$. it date this document was signed.	f other than the
\$\langle \langle \lang	
Effective date if applicable: 0/1/24 (no more than 90 days after amendment file date)	
(III) Hore man / a days dyles differentially de delley	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
★ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and share action was not required.	eholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
Dated 8/1/24 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 court appointed fiduciary by that fiduciary)	
Earl Rissler (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
()resident	
(Title of person signing)	