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(Red	questor's Name)	
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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Backflow Acquisi	tion Corp.		
DOCUMENT NUME	BER: P16000065654			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Diane J Harrison			
		Name of Contact Perso	n	
	Backflow Acquisition Corp.			
		Firm/ Company		
	6719 Bobby Jones Ct			
		Address		
	Palmetto FL 34221			
		City/ State and Zip Cod	le	
Diane	@harrisonlawpa.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Diane J Harrison		at (at	723-7564	
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Backflow Acquisition Corp. (Name of Corporation as currently filed with the Florida Dept. of State) P16000065654 (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: The new 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 <u>MUST BE A STREET ADDRESS</u>) 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 office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (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.

Example: 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)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	Michael J Daniels	6719 Bobby Jones Ct
Add X Remove			Palmetto FL 34221
2) Change	P	Diane J Harrison	6719 Bobby Jones Ct
X Add			Palmetto FL 34221
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			······································
6) Charas			
6) Change			
Add Remove			
Kemove			

Allach ada	litional shee	g additional ts, if necessa	ry). (Be	specific)					
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The date of each amendmendate this document was signed		, if other than th
_	October 14, 2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
	this block does not meet the applicable statutory filing requirements, this define Department of State's records.	ate will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment (ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Octol Dated	per 16, 2016	
Signature	Mare S. Harrison	
(E	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	Diane J Harrison	
	(Typed or printed name of person signing)	
	Secretary .	
	(Title of person signing)	