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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Harold Plumbing Services Corp
NAME OF CORPORATION: Harold Plumbing Services Corp BOCUMENT NUMBER: P17000010999
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Harold Perez Name of Contact Person
Harold Plumbing Services Corp
14108 SW 274 ter Address
Homestead, FL 33032 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Harold Perez at (+86) 354-4570 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

to

Harold Plumb	ing Services Corp	
		ite)
PHOC	00010999	
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts th	e following amendment(s)
A. If amending name, enter the new name of the corporatio	<u>n:</u>	
name must be distinguishable and contain the word "corporation	ing Corp	Thenew
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "i	". A professional corporation name m	ubbreviation "Corp.," ust contain the word
B. Enter new principal office address, if applicable:	<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		\$FC 2023
		1 787
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		و <u>آ</u> 9 برون
(Manual and Case Manual And Control of the Control		
		10:107
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado		<u>1e</u>
Name of New Registered Agent		
(Florid	da street address)	
New Registered Office Address:	, Florid	(Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	gent: liar with and accept the obligations of the	position.
Signature of N	ew Registered Agent, if changing	

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.

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>	Name		<u>Addres</u> s	
1) Change					
Add					
Remove			-		
2) Change			 		
Add					
Remove 3) Change			 		
Add					
Remove			_		
4) Change			 		
Add					
Remove			_		-
5) Change			 		
Add					
Remove					
6) Change			 		
Add					
Remove			-		

Attach additional sh	ing additional Art eets, if necessary).	(Be specific)				
<u></u>			***			
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						-
				<u>-</u>		
				_		
						_
		 -				
		, 		···		
<u>f an amendment pr</u>	covides for an exch	ange, reclassific	tion, or cancella	tion of issued sha	ires,	
provisions for impl	lementing the ame	ndment if not co	ntained in the am	endment itself:		
(ң ноғ аррисан	le, indicate N/A)					
						
				·		
			-		· · · · · · · · · · · · · · · · · · ·	
			-			
				-		

The date of each amendment(s) a	loption:	, 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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendmental option of the shareholders.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	25-31-23 Sandy	
selected	recompresident or other officer – if directors or officers have not be if, by an incorporator – if in the hands of a receiver, trustee, or other c ed fiduciary by that fiduciary)	en ourt
	Harold Perez	
	(Typed or printed name of person signing)	
	Owner	
	(Title of person signing)	

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