P17000171005

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE APR 3 U ZUZ4
J. HORNE
TLK 10 FOF.

Office Use Only



100427015151

34/108/24--01021--012 ******35.00

2024 APR -9 PM 3: 38



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Profit Corporation pursua to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You a responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with tobligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director,
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cov letter.

Street Address

Amendment Section

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: poolscapes florida	inc		
DOCUMENT NUM	P17000017605			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	matthew szafran			
		Name of Contact Person	1	
	poolscapes florida inc			
		Firm/ Company		
	127 w fairbanks ave suite 47	7		
		Address		
	winter park fl 32789			
		City/ State and Zip Cod	e	
	mross@pinnpool.com			
		sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:	663-1398	
	e of Contact Person	at (de & Daytime Telephone Number	
	for the following amount made		•	
■ \$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)	
	ailing Address		Address	
	nendment Section		ment Section	
	vision of Corporations D. Box 6327		n of Corporations entre of Tallahassee	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
υf

poolscapes florida inc (Name of Corporation as currently filed with the Florida Dept. of State) P17000017605 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: pinnacle pool & spa company 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." 127 w fairbanks ave B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) suite 477 winter park fl 32789 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: matthew szafran Name of New Registered Agent 127 w fairbanks ave ste 477 (Florida street address) winter park New Registered Office Address: (City)

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.

stered 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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office <math>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. The 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 Cha Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				<u> </u>
6) Change		_		
Add				
Remove				

E. If amending or addin (Attach additional shee	ets, if necessary).	(Be specific)				
Company name change						
					·	
		***		_		
						
						<u> </u>
				. <u>-</u>		
		<u>-</u>				
						
						<u> </u>
	_					
. If an amendment pro	vides for an exch	ange, reclassifi	cation, or cane	ellation of issue	d shares,	
provisions for imple (if not applicable	menting the ame	<u>ndment if not c</u>	ontained in the	<u>amendment it</u>	self:	
	·					
						•

4/3/24	
The date of each amendment(s) adoption:date this document was signed.	, if other than
Effective date <u>if applicable</u> :	
(no mo)	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's r	he applicable statutory filing requirements, this date will not be listed as ecords.
Adoption of Amendment(s) (CHECK O.	<u>NE</u>)
The amendment(s) was/were adopted by the incorpora action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the sharehold must be separately provided for each voting group er	
"The number of votes cast for the amendment(s) was/were sufficient for approval
matthew szafran by	<u>,</u>
(voting group))
	ther officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court iduciary)
matthew szafran	
	printed name of person signing)
vp	t
(Title of p	person signing)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing *Articles of Amendment* to amend the articles of incorporation of a *Florida Not for Profit Corporation* pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with tobligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee S35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached co letter.

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

Street Address
Amendment Section
Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may call the Amendment Section at (850) 245-6050

CR2E009 (4/15)

COVER LETTER

TO: Amendment Section Division of Corporations

POOLSCAPES FLORIDA INC NAME OF CORPORATION:
P17000017605 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MATTHEW SZAFRAN
(Name of Contact Person)
PINNACLE POOL COMPANY
(Firm/ Company)
127 WEST FAIRBANKS AVE STE 477
(Address)
WINTER PARK FL 32789
(City/ State and Zip Code)
MROSS@PINNPOOL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MATTHEW SZAFRAN 321 6631398 at
(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:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is

Mailing Address

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

Street Address

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

Enclosed)

Articles of Amendment to Articles of Incorporation of

2024 APR-9 PH 3

POOLSCAPES FLORIDA INC

(Name of Corporation as currently filed with the	Florida Dept. of State)		
P17000017605			
(Docum	ent Number of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida a</i>	Not For Profit Corporation adop	ts the following
A. If amending name, enter the new name of the PINNACLE POOL & SPA COMPANY	corporation:		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	•	porated" or the abbreviation "Co	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
D. If amending the registered agent and/or registered agent and/or the new registered		lorida, enter the name of the	
Name of New Registered Agent:	MATTHEW SZAFRAN		
	127 W FAIRBANKS AV	E STE 477	
New Registered Office Address:		(Florida street address)	
	WINTER PARK	, Florida	.789
	(City)	(Zip Cod	e)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent —	t. I am familiar with and	accept the obligations of the posi	tion.
)		

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 = Chi 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
		 	
			

		 -		<u>.</u>
				
	<u>-</u>			
				<u>-</u> .
				
	·			
				
				
The date of each amendment(s) adoption: date this document was signed.				, if other than t
Effective date if applicable:	1 90 days after ame	andmont 6th day	.)	
				h - 12 0 0
<u>Note:</u> If the date inserted in this block does not meet the document's effective date on the Department of State's i	e applicable statuto records.	ory ming require	ments, this date will	not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated O4/05/2024 Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
MATTHEW SZAFRAN
(Typed or printed name of person signing)
VP

(Title of person signing)