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- (Re	equestor's Name)	
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' COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Oasis Preferred Ma	aintenance, Inc.	
	BER: P17000082760	····	· · · · · · · · · · · · · · · · · · ·
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Robert Hayslette		
		Name of Contact Person	1
	Oasis Preferred Maintenance	, Inc.	
		Firm/ Company	
	PO Box 131		
		Address	
	Pensacola, FL 32591		
		City/ State and Zip Code	e
admi	n@oasispmpro.com		
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Robert Hayslette		at (850 292 24	01,
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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			Address
	Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building			
	lahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

- FILEO

Oasis Preferred Maintenance, Inc.		FELLO
(Name of Corporatio	n as currently filed with the Flo	rida Dept. of State) · 2명의 KAY IU 모 IE 및 III
P17000082760		EDID ITAL EN TO BE
(Docume	ent Number of Corporation (if kno	MOTEOUR PART FROTO (nwo
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this <i>Florida Profit Corp</i>	
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the a	""Inc," or "Co". A profession	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
wew negistered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- hereby accept the appointment as registered agent.		obligations of the position.
Signa	ture of New Registered Agent, if o	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 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: XChange	<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) X Change	AS/D	Robert Hayslette	PO Box 131
Add			Pensacola, FL 32591
Remove			
2) Change	S/D	Jennifer Edwards	PO Box 131
Add			Pensacola, FL 32591
X Remove			
3) Change	S/D	Roger S. Jump	PO Box 131
X Add			Pensacola, FL 32591
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	cation, or cancellation of issued shares, ontained in the amendment itself:	If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:	cation, or cancellation of issued shares, ontained in the amendment itself:		
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	contained in the amendment itself:	f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
		provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

	05/09/19	
The date of each amendmen date this document was signed		, if other than the
man	05/09/19	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
	this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
05/0 Dated	9/19	
Signature	Pobut Haye Oth	
(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)	
	Robert Hayslette	
	(Typed or printed name of person signing)	
	Assistant Secretary, Director	
	(Title of person signing)	