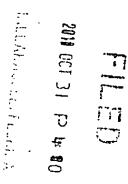
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: AQUA DOCS WATER RESTORATION.
DOCUMENT NUMBER: 2170000 94 200
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jotta Devia
Name of Contact Person
AQUADOCS water Restoration inc
2054 vista Parkway suite 400
WestPalm Beach FL 33498 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John Devia at (561) 891-8098 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) Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address Annual Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation	
AQUADOCS Writer Restor	ration inc
(Name of Corporation as currently filed with the F	orida Dept. of State)
P17000094200	
(Document Number of Corporation (if ki	iown)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Cor</i> its Articles of Incorporation:	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "company," o "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	JA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SA
D. If amending the registered agent and/or registered office address in Florida, en new registered agent and/or the new registered office address:	ter the name of the
Name of New Registered Agent 2054 U'S:+A (Florida street address)	Kway 5vite40
New Registered Office Address: WEST Palm Beac (City)	H . Florida 33 498 (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 ω

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>РТ</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			

amending or adding adding additional sheets, i	necessary). (Be	? specific)			
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an amendment provide provisions for implemen	ing the amendme	nt if not contained	in the amendment	itself:	
(if not applicable, ind	icate N/A)				
		14	X		
			$\langle \cdot \rangle$		
	<u> </u>		7)		
					

The date of each amendment(s) adoption:	xto Ber	24	908	, if other than the
date this document was signed.				
Effective date if applicable:	\sim			
	(no more than 90 days after	amendment file	date)	
Note: If the date inserted in this block does not document's effective date on the Department of S		y filing require	ments, this date wil	I not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)			
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		otes east for the	e amendment(s)	
☐ The amendment(s) was/were approved by the smust be separately provided for each voting g				
"The number of votes east for the amend		or approval		
by	g group)			
(votin	g group)			
☐ The amendment(s) was/were adopted by the beaction was not required.		cholder action a	and shareholder	
The amendment(s) was/were adopted by the in action was not required.	corporators without sharchol	der action and s	harcholder	
Dated O D Signature	9018			
(By a director, presid	ent or other officer - if direct			
selected, by an incorp appointed fiduciary b	oorator – if in the hands of a i	receiver, trustee.	, or other court	
appointed reality of	y mar nuderary)			
	- by Hx) De	20)cA		
<u>(T</u>	yped or printed name of pers	on signing)		
	Presiden	+		
	(Title of person sign	ning)		

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