(Re	questor's Name)	· 	
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAΠ	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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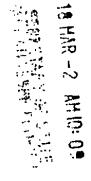
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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Professional Pools & Spartne					
DOCUMENT NUMBER: P18000011043					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Jennifer L Bigelow Name of Contact Poson					
Professional Pools & Spanta.					
3769 Garlenda AVe					
Address					
North Port FL 34286 City/ State and Zip Code					
Denn Wes 25 Genail. Com E-mail address: (to be used for future innual report notification)					
For further information concerning this matter, please call:					
Jannifes L Bicklow at (941) 915- (298) 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 Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Street Address Amendment Section					

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

Protessional Po	0/2 &	Spg. I	NC.		
P180000 11043		filed with the Florid			
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:		Corporation (if known Florida Profit Corpora		lowing amendme	nt(s) t
A. If amending name, enter the new name of the of the second property of the second property of the second property of the second property of the designation "Corp.," "Inc.," or Co.," or the designation "Corp., or the designation, or the second chartered, "professional association," or the second property of the second	ord "corporation p," "Inc," or "C	λο". A professional c	ncorporated" or	the abbreviation	
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD				118 00	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>0x</u>)			MAR -2 AH 10: 03	FILED
D. If amending the registered agent and/or registered new registered agent and/or the new registered			he name of the		
Name of New Registered Agent					
	(Florida stre	ct address)			
New Registered Office Address:	(Cuy)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		ith and accept the obli	gations of the posi	ition.	
Sig	nature of New Ro	gistered Agent, if char	nging		

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>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				·
Remove				
6) Change				
Add				
Remove				

	ary). (Be specific)	
		
		-
		
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provisions for implementing the	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:	
	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated 02 13 18 Signature V MAQUUN	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
TENNITER DISSELON (Typed or printed name of person signing))
Secretary, Treasurer	· · · · · · · · · · · · · · · · · · ·
(Title of person signing)	