## P18000029112

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(Address)			
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(City/State/	Zip/Phone #)		
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(Business I	Entity Name)		
(Document Number)			
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Amend

JUN 1 2 2018 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

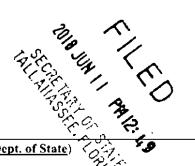
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Division of Corp	porations			
NAME OF CORPO	RATION: LEAK MASTERS	, INC.		
DOCUMENT NUM	BER: P18000029112			
		hmitted for filing		
The enclosed Articles	s of Amendment and fee are su	onined for ming.		
Please return all corre	espondence concerning this ma	tter to the following:		
	RANDY MARTINEZ			
		Name of Contact Person		
	LEAK MASTERS, INC.			
		Firm/ Company	8530 SW124 AVE# 211	
		Address		
	I/	niami FL3	33/ <i>93</i>	
		City/ State and Zip Code		
RAN	IMAR1974@YAHOO.COM			
-	<del>-</del>	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
RANDY MARTINEZ		at ( <u>305-910-63</u> :	3:	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



LEAK MASTERS, INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000029112	Albridge Control of the Control of t
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation 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 "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	mjami Pl 33183
	8530 CUS 124A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<b>85</b> 30 SW 124A ml ami Fl 33183
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
	<u></u>
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	nt.
I hereby accept the appointment as registered agent. I am familiar	··· with and accept the obligations of the position.
i nereo, accept the appointment as registered agent. I am jumitiar	min and accept the congunous of the position.

Signature of New Registered Agent, if 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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	Title		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				
Ο CI				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti- Attach additional sheets, if necessary).				
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		• •		_
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or idment if not contained i	cancellation of issued on the amendment itself	shares, f:	
	<del></del>			

The date of each amendment(s	adoption:	, if other than the
date this document was signed.	UNE 1, 2018	
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ement en
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
JUNE 1	, 2018	
Dated Signature	Bandy Marting	
	addressor, president of other other examples of others have not be	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	ourt
арр	onlied fiductary by that fiductary)	
	RANDY MARTINEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . .