P19000039545

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone#	7)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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Amend Cu:

JUL 18 2019
I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLOBAL AIR CO	ONDITIONING AND PLUI	MBING INC.
DOCUMENT NUM	BER: P19000039545		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RAYMOND HASELMAN		
		Name of Contact Person	1
	RAY HASELMAN, ESQ.		
		Firm/ Company	
	4801 SO UNIVERSITY DRI	IVE STE 268	
		Address	
	DAVIE, FL 33328		
		City/ State and Zip Code	2
HAS	ELMANLEGAL@GMAIL.C	ОМ	
4	_	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
RAY HASELMAN		786 at (522-0410
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

GLOBAL AIR CONDITIONING AND PLUMBING INC.

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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."	(Name of Corporation P19000039545	currently filed with the Florida Dept. of State)
A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 (Florida street address) New Registered Office Address: New Registered Office Address: Florida		ımber of Corporation (if known)
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida Florida Florida Florida		es, this Florida Profit Corporation adopts the following amendment(s) to
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Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida		
Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida		
Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida	D. If amending the registered agent and/or registered	ice address in Florida, enter the name of the
(Florida street address) New Registered Office Address:		
New Registered Office Address:	Name of New Registered Agent	
New Registered Office Address:		
		orida street address)
(City) (Zip Code)	New Registered Office Address:	
		(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	I hereby accept the appointment as registered agent. I a	imiliar with and accept the obligations of the position.
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.		
		f 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	PT	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	LISANDRA SANDOVAL	7234 NW 42ND ST
Add XX Remove			CORAL SPRINGS, FL 33065
2) Change	VP	LISANDRA QUINONES	7234 NW 42ND ST
XX Add			CORAL SPRINGS, FL 33065
Remove			
3) Change		_	
Add			
Remove			
4) Change	***		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
				
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f an amendment provides for an excl	hange, reclassificatio	on, or cancellation o	of issued shares,	
provisions for implementing the ame	endment if not conta	<u>ined in the amendo</u>	nent itself:	
(if not applicable, indicate N/A)				
				
				
				
				, ,

The date of each amendme	06/01/2019 nt(s) adoption:	if other than th
date this document was signed		, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Differentiare data if applicable	06/01/2019	
Effective date <u>if applicable</u>	(no more than 90 days after amendment file date)	
	n this block does not meet the applicable statutory filing requirements, this date win the Department of State's records.	ll not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
☐ The amendment(s) was/w	vere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval	
bv 100	(voting group)	
	(voting group)	
☐ The amendment(s) was/v action was not required.	vere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/v action was not required.	vere adopted by the incorporators without shareholder action and shareholder	
07/0 Dated	06/2019	
Signature		
C	(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)	
MUST	(Typed or printed name of person signing)	
Raymond Haselman/ Esq.		
	(Title of person signing)	