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TALLAHASSES EN



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	eation: Adua Er: P19	ntage air	Conditioning FOC
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this man	tter to the following:	
	Fdwc 16547	Name of Contact Person	<u> </u>
	Tallah Dakoventev E-mail address: (to be us	Address USee FL City/ State and Zip Code Of Sed for future annual report	3) amail, com
For further information	t concerning this matter, pleas	se call:	_)
Name o	of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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
Amendment Section Division of Corporations P.O. Box 6327

Street Address Amendment Section

Division of Corporations Clifton Building

Articles of Amendment

Articles	to of Incorporation		
Advantage Air	Pond: Honix	19 Inc	
(Name of Corporation as cu	rrently filed with the Florida	Dept. of State)	
RIG BOOD	(07x28 1		
(Document Num	ber of Corporation (if known)		•
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporat	ion adopts the following	g amendment(s)
A. If amending name, enter the new name of the corporation of the designation of the designation of the abbrevial of the corporation of the designation of the abbrevial of the corporation of the corporat	oration." "company," or "in or "Co". A professional co		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TALLANAS SEE,	2019 AUG 28 PH L
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac		ie name of the	Si Si
Name of New Registered Agent			-
	rida street address)		-
New Registered Office Address:		Florida	
	(Cuy)	(Zip)	Code)
New Registered Agent's Signature, if changing Registered . I hereby accept the appointment as registered agent. I am fan		gations of the position.	
Signature of	New Registered Agent, if chan	aging	_

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)

Remove

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.

Mike Jones, V as Remove Example:	, and Sal	ly Smith, SV as an Add.	
X Change	<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>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add	• • •		
Remove			
Keniove			VI
6) Change			
Add			

2. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
. If an amendment provides for an exc	hange, reclassification, or cancellation of issued sha	res.
provisions for implementing the am-	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
·		
·		

The date of each amendment(s) adoption:		
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment)	tile date)
Note: If the date inserted in this block does no document's effective date on the Department of S		nirements, this date will not be listed as the
Adoption of Amendment(s) (CHI	ECK ONE)	
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a		the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the amen	iment(s) was/were sufficient for approval	
by	ng group)	••
/	ng group)	
The amendment(s) was/were adopted by the baction was not required.	oard of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were adopted by the i action was not required.	ncorporators without shareholder action a	nd shareholder
Dated		
Deni	I Rohu	
Signature (Ry a finator proci	dent or other officer – if directors or office	are have not hour
,	porator – if in the hands of a receiver, true	
appointed fiduciary		
	David Baker	
(^c	Typed or printed name of person signing)	
	\square	
	(Title of person signing)	