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### COYER LETTER

TO: Amendment Section

**Division of Corporations** 

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: JWI Mechanical Inc.  DOCUMENT NUMBER: P19000075983				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Bobby S. Sheridan  Name of Contact Person  TWI Mechanical Inc.  Firm/ Company  85669 Blackmon Rd. Yuler, F132097  Address  Yuler, Florida 32097  City/ State and Zip Code  55. buford a yahao. com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Bobby S. Sheridan at (904) 849-1180  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  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section  Street Address Amendment Section				

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

#### **Articles of Amendment**

to

## Articles of Incorporation of

JIN I Mechanical	Inco	
(Name of Corporation as currently	filed with the Florida Dept. of State	)
P 14 0000 15 48 d	Corporation (if known)	
·	•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation adopts the fo	ollowing amendment(s) t
A. If amending name, enter the new name of the corporation:	NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE ROX)	NA	
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:		19 OCT 2
Name of New Registered Agent	NA	
(Florida stre	NA, Florida_	9: 10 9: 10
(	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the po	sition.
Signature of New Re	egistered 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.

Mike Jones, V as Remov	e, and Sally Smi	ih, SV as an Add.	
Example: <u>X</u> Change	<u>PT</u> <u>John</u>	Doe	
X Remove	Y Mik	2 Iones	
X Add	SV Sally	/ Smith	
Type of Action	Title	Name	Address
(Check One)  1) Change	P	Darren S. Buford	85669 Blackmon Rd.
Remove			Yulee, Florida 32097
2) Change	NA	NA	
Add Remove			
3) Change	NA	NA NA	
Add Remove			— <u> </u>
4)Change	NA	NA	
Add			
5) Change	WA	NA	
Add			
Remove	.0	AIN	·
6) Change	$\overline{\mathcal{M}_{N}}$		MA
Remove			

A' tach additional sheets, if necessary). (Be specific)	
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	00T 23 AM
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	23
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
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	<u> </u>
. 1	<u> </u>
N/A	

The date of each amendment(s) adoption: September 26, 2019, if other than the date this document was signed.
Sonlan-hon 21, Doig
(no more than 90) days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"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 and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action and required.
Dated Orlohor 8,2019 Signature Orlohor 18,2019
(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)
DARREN S. Butord
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)