P19000 077 574

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500337124855

11/20/19--01010--008 +-PF.00

19 KOV 20 PM 2: LD

Smerno

DEC 23 2019

D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

JTIONS CORP			
bmitted for filing.			
tter to the following:			
Name of Contact Perso	n		
CORP			
Firm/ Company			
Address			
City/ State and Zip Cod	e		
sed for future annual report	notification)		
se call:			
321	900-9181		<u>:</u> ,
Area Co	de & Daytime Telephone Number		- م ا
payable to the Florida Dep	artment of State:		
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	0 PM 2: 140	SHOTERGIONS
	bmitted for filing. Itter to the following: Name of Contact Person CORP Firm/ Company Address City/ State and Zip Cod See for future annual report See call: at (321 Area Co payable to the Florida Depayable to the Florida Depay (Additional copy is enclosed) Street Amend	bmitted for filing. Itter to the following: Name of Contact Person CORP Firm/ Company Address City/ State and Zip Code Iteed for future annual report notification) Itee call: at (321) 900-9181 Area Code & Daytime Telephone Number payable to the Florida Department of State: \$\Begin{array}	bimitted for filing. Itter to the following: Name of Contact Person ORP Firm/ Company Address City/ State and Zip Code Iteed for future annual report notification) Itee call: at (321

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLOW PIPE SOLUTIONS CORP

(Name of Corpor	ration as currently filed with the Florida Dept. of Sta	<u>te</u>)
P19000077574		
(Do	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the	e following amendment(s) t
A. If amending name, enter the new name of the	e corporation:	
. <u></u>		The new
	word "corporation," "company," or "incorporated" orp," "Inc," or "Co". A professional corporation na the abbreviation "P.A."	
B. Enter new principal office address, if applica	able:	
(Principal office address <u>MUST BE A STREET A</u>	ADDRESS)	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u></u>	
		₹.
		9 35
D. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:	
		20 20
Name of New Registered Agent		
	(Florida street address)	<u> </u>
	(r tortaa street daaress)	AA E
New Registered Office Address:	, Florida	~
	(City)	(Zip Code)
New Registered Agent's Signature, if changing l	Registered Agent:	
	nt. I am familiar with and accept the obligations of the	position.
<u></u>	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	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	CARLOS A CRUZ IZARRA	3190 RETREAT DR
x Add				202
Remove				KISSIMMEE, FL 34741
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
δ) Change		_		
Add				
Remove				

	(Be specific)
	-
	iango reclassification or cancellation of issued shares
provisions for implementing the ame	ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
11/15/2019	
Effective date <u>if applicable</u> : (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 document's effective date on the Department of State's records.	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 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)	
(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 was not required.	
11/15/2019 Dated	
Signature THS	
(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)	_
RONALD PEREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	