P19000094408

(Re	questor's Name)	· · · ·
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FEB 17 7020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Properties	Leak Service Repair Corp			
DOCUMENT NUMBER: P 190000	94408			
The enclosed Articles of Amendment and fee are so	abmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
EDuare	J. Suarez Name of Contact Person			
Name of Contact Person				
	Firm/ Company			
5380 NW	174 Drive			
Mianti Gardens FL 133055 City/ State and Zip Code				
E-mail address: (to be a	sed for future annual report notification)			
For further information concerning this matter, plea	ase call:			
Eduard Sugrez	at (786) 877-9128 ·			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	e payable to the Florida Department of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassec, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PIPE LEAV

LIFE LEAK SERVICE RE	PAIR, CORP
	ly filed with the Florida Dept. of State)
P19000094408	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must he distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". I chartered," "professional association." or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	5380 NW 174 Drive. Wari bardins, Fl 33055
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	7020 JAN 21 P SEPANTHENT S HALLAHASSEE
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent EDVald - Su	all 2 ·
5'380 NW (Florida str	174 Dive
New Registered Office Address: Waki Galdy	5 Florida_3.30.55
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar is signature of New R	t: with and accept the obligations of the position. Registered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e). F.S.

 \Box The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder

action was not required.

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 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>	Address
1) Change	P	Edward Sugrez	5380 NW 174 Drive.
X Add			Mari bardens 77,33055
Remove			<u> </u>
2) Change	V.P	Elvia Ferrel	5380 NW 174 Drive.
X Add			War bordens Fl. 33055
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary,). (Be specific,)			
						
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an amendment	provides for an ex	change, reclass	ification, or cance	llation of issued	shares.	
<u>provisions for in</u>	nplementing the an	change, reclass nendment if not	ification, or cance contained in the	llation of issued s amendment itsel	shares. f:	
<u>provisions for in</u>	provides for an ex nplementing the an table, indicate N/A)	change, reclass nendment if not	ification, or cance t contained in the	llation of issued s amendment itsel	shares. f:	
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<u>provisions for in</u>	nplementing the an	change, reclass	ification, or cance	llation of issued s amendment itsel	shares, f:	

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The date of each amendment(s) ad-	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing require artment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for ticient for approval.	he amendment(s)
• •	oved by the shareholders through voting groups. The fa ach voting group entitled to vote separately on the ame	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated Signature X	4/2020 Aluns	
(By a dir selected.	ector, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, trusted d fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	
	_	
_	President.	
	(Title of person signing)	