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COVER LETTER

Division of Corporations NAME OF CORPORATION: HANDY JET Plumbing CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

- ~	
HANNY JET PLUMBING COP	Poration
(Name of Corporation as currently	filed with the Florida Dept, of State)
P 200000 290	60
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>E</i> its Articles of Incorporation:	Horida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P,A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	CHAPLES MAGILEWSLU
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	3906 ENTERPRISE AVENUE
	Nables Ficeida 34104.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS AVOBE.
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Name of the negative angen	
tFlorida stre	et address)
V 5	F1 - 1
New Registered Office Address:	, Florida
	2020
	City) (Zip Gode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	The second secon
r nereny accept the appointment as registered agent. Tam jamitar w	am and accept the obligations of the position. Of
Signature of Many Pa	aistered Agent if changing

Check if applicable

☑ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 De	<u>oe</u>	
X Remove	\underline{V}	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change			DENITEZ CESTES	5147 17th NE SW
X_Add				Naples Florida
Remove	\circ		·	34116
2) Change	5	_	Jun Sequera	5670 NW 116 AUC
X Add				AR 222 Miami FL 33178.
Remove 3) Change	<u>T</u>	_	Salvatore Markaiopar	2585 Brantley Blv
X Add			'	Naples Foreida 34117
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				·
Remove				
6) Change		_		
Add				
Remove				

amending or adding additional Articutant and articutant additional sheets, if necessary).	(Be specific)
NONE	
NONE	
	·
	
	
	
· - ·	4-6-1
an amendment provides for an excharge an excharge an excharge and a superior and	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	THE THE THE TAX CONTINUES IN THE BIRTH HOLD HOLD.
MONE	
110100	

The date of each amendment(s) adop	otion:	UCTOBER	139 (6020	, if other than the
date this document was signed.		1 -			
Effective date <u>if applicable</u> :	<u> 10/01 /</u>	2020_ o more than 90 do			
	ln	o more than 90 da	iys after amen	dment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa			e statutory fili	ng requirements, th	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHEC</u>	(K ONE)			
☐ The amendment(s) was/were adopte action was not required.	ed by the inco	orporators, or boa	rd of directors	without shareholder	action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffi-			imber of votes	east for the amenda	nent(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the sh ch voting gro	parcholders throug oup entitled to vot	h voting group e separately or	s. The following sta the amendment(s):	itement
"The number of votes cast for	r the amendn	nent(s) was/were s	ufficient for a	pproval	
by Handy JET	PIUM ?	31 06 C C group)	<u> </u>	<u></u> .	
Dated Scrient Signature C	RER SER	29th 2020	2-	_	
selected, b	by an incorpo			r officers have not by ver, trustee, or other	
_	\mathcal{C}	HARLES Printed name	1ACOILE TO	sui	
	(Ty	ped or printed nan	ne of person si	gning)	
_		PRESIDE	7V7		
	(Tit	le of person signif	ng)		