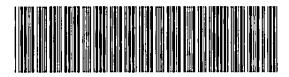
20000033080

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

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Paradise Sprinklers	s, Inc.		
	IBER: P20000033080			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	John Cross			
	·	Name of Contact Persor	1	
	Paradise Sprinklers, Inc.			
		Firm/ Company		
	9010 Sunrise Lakes Blvd #11	2		
		Address		
	Sunrise, FL 33322			
		City/ State and Zip Code	e	
	paradisesprinklers@gmail.co	.		
		sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:	319-2515	
Name	e of Contact Person	at (Area Co) de & Daytime Telephone Number	
	for the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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			Address Iment Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Paradise Sprinklers, Inc.	2021 AUG 10 PH II: 57
(Name of Corporation as	s currently filed with the Florida Dept. of State)
P20000033080	SECRETARY OF STATE Number of Corporation (if known) Number of Corporation (if known)
(Document	Number of Corporation (if known) 1744 LP/11/25EE, FL
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpor	ration:
	The new
	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co".—A professional corporation name must contain the word ion "P.A."
B. Enter <u>new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ss</u>)
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered o	
new registered agent and/or the new registered offic	e address:
Name of New Registered Agent	
((Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
hereby accept the appointment as registered agent. I am	
Signature	of New Registered Agent, if changing
	alternative services and the constraints
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)

Example:

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	John Nelson Cross	8008 SW 29th Street
X Add			Davie, FL 33328
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		 :	
Remove			

taen <i>aaattional sheet</i>	g additional Arti is, if necessary).	(Be specific)				
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<u> </u>						
-						
				<u> </u>		
					···	
						
					<u> </u>	
<u> </u>						_
an amendment pro	wider for an excl	hange reclassifi	eation or cane	ellation of issued	l shares.	
rovisions for imple	menting the ame	endment if not c	ontained in the	amendment its	·lf:	
(if not applicable	indicate N/A)	indine in it in it c				
tij nor appiteant	, marcare 1 mm					
<u> </u>	-			_		
	<u> </u>		.			
			 ,			
					,	

	adoption:	, if other than the
date this document was signed.	Name 5 2021	
Effective date <u>if applicable</u> :	ugust 5, 2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amer sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
August : Dated	5. 2021	
Signature	Call & Cun	
(By sele	a director, president or other officer – if directors or officers have no cted, by an incorporator – if in the hands of a receiver, trustee, or ot pinted fiduciary by that fiduciary)	
	John H. Cross	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	