P20000045216

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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Splash Bro's Pools	& Spas Inc	
	1BER: P20000045216		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Rani Silberman		
		Name of Contact Perso	n
	Splash Bro's Pools & Spas In	c	
		Firm/ Company	
	2190 N 29th Ave #201		
		Address	
	Hollywood, FL 33020		
		City/ State and Zip Cod	e
	myaccountant@tandaoffice.c	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se cali:	
Maya Razla		954 at () 983-9394 de & Daytime Telephone Number
Nam	e of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di	ailing Address nendment Section vision of Corporations O. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to **Articles of Incorporation** of

Splash Bro's Pools & Spas Inc

2020	Ċ		21	• • •	٥.	22

		<u> </u>	
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	
P20000045216			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:		
		The new	
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."	
B. Enter new principal office address,	if applicable:	1835 NE Miami Gardnes Dr Ste 456	
(Principal office address <u>MUST BE A S</u>		North Miami Beach, FL 33179	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		1835 NE Miami Gardens Dr Ste 456	
		North Miami Beach, FL 33179	
			
D. If amending the registered agent ar			
new registered agent and/or the new	w registered office addre	<u>ss:</u>	
Name of New Registered Agent	Rani Silberman		
	1835 NE Miami Gardens	Dr Ste 456	
	(Florida s	street address)	
New Registered Office Address:	North Miami Beach	, Florida 33179	
New Wegister en en grade Haar ess.		(City) (Zip Code)	
New Registered Agent's Signature, if o		nt: r with and accept the obligations of the position.	
r nevery accept the appointment as regist	erea ageni. Tam jaminai	with and accept the obligations of the position.	
	Signature of New	Registered Agent, if changing	
Charles Committee blo			
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 Doe	
_			
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 -		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a History / 1	ding additional Artic	les, enter change	e(s) <u>here</u> :		
(Attach additional sl	heets, if necessary).	(Be specific)			
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. If an amendment pi	rovides for an excha	nge, reclassificat	ion, or cancellati	on of issued shares	•
provisions for imp	lementing the ameno	<u>iment if not cont</u>	tained in the ame	ndment itself:	-
(у пог аррпсая	ie, maicule WA)				
					
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if other than t
be listed as t
reholder