## P20000061931

3003524
0000021
09/21/20010
2

Office Use Only



47113

110--030 \*\*35.00

2629

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _D E C O N E X
DOCUMENT NUMBER: P20000061931
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MIKE ROBERT  Name of Contact Person
Firm/ Company 3070 NW 98 S+ Address
MINHI - FL 33147
City/ State and Zip Code  Cecoled @ 9mail - Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  WIKE ROBERT  at 305   755 2842
MIKE ROBERT  Name of Contact Person  at (305), 755, 2842  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DECON'EX PLUMBING CORP.

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," 'Inc, ' or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," 'Inc., or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," 'Inc., or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n(s) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," 'Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Principal office address MUST BE A STREET ADDRESS)	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:  (Mailing address MAY RE A POST OFFICE ROX)	
C. Enter new mailing address, if applicable:  (Mailing address MAY RE A POST OFFICE ROX)	
C. Enter new mailing address, if applicable:  (Mailing address MAY RE A POST OFFICE ROX)	
C. Enter new maining address, it applicable:  (Mailing address MAY RE A POST OFFICE BOX)	
(Printing andress Print Bir / 1 1 VIII VII 1 VIII VIII)	•
ري. ري	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered 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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	$\underline{\lambda'}$	Mike Jor	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P	_	YARELIS PEREZ	3070 NW- 98 ST
Add				MID-FL, 33147
	_			
2) Change	P	_	REINALDO	3070 NW-9857
_ <b></b> Add			MERIDA	MIA-FL, 33147
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<del></del>			
Add				
Remove				

ttach additional sheets, if necessary).	(Be specific)	ige(s) here:			
				· -	
		-			
	<del></del>				
			<del>-</del> <del></del> -		
					<del> </del>
1	<del></del> -				
		<u>-</u>	<del>-</del>		
an amendment provides for an exc	hanga raalaccifi	ention or conc	allation of icen	ud charec	
rovisions for implementing the am	endment if not c	ontained in the	amendment it	self:	
(if not applicable, indicate N/A)					
				<del></del>	<del>-</del>
			<u>-</u> -		

The date of each amendment(s) adoption:O 9-date this document was signed.	-10-2020 if o	ther than the
Effective date if applicable: 09-1	0 - 2020 than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	e applicable statutory filing requirements, this date will not be cords.	listed as the
Adoption of Amendment(s) (CHECK ONE	<u>E</u> )	
The amendment(s) was/were adopted by the incorporato action was not required.	tors, or board of directors without shareholder action and shareholder	older
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entit	ders through voting groups. The following statement itled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) w	was/were sufficient for approval	
by DENT - 750±2() (voting group)		
	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court	
	PEDEZ printed name of person signing)	
	SIDENT_	