(Re	equestor's Name)	<u></u>
(Ad	ddress)	
(Ac	idress)	
(Cr	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Name)	<u> </u>
(Do	ocument Number)	
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DATE: 06/25/24

NAME: OHANA POOLS OF FLORIDA INC

TYPE OF FILING: AMENDMENT

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Ohana Pouls of Floride Inc.	
DOCUMENT NUMBER: P210000 83969	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bryan Holmes Name of Contact Person	
Ohana Pools of Florida Inc.	
NIO NE 40 th Court Address	
Oakland Park FL 3333 Y City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	- `
For further information concerning this matter, please call:	
Brych Italing at 1 561, 990-8289 Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)	
Mailing Address Amendment Section Amendment Section	

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

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

Ohang Pools				
(Name of Corporation			a Dept. of State)	
P2/000	00839	69		
		orporation (if known	1)	
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:		orida Profit Corpora	tion adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of the corp	oration:			
				The _new
name must be distinguishable and contain the word "corp- "Inc.," or Ca" or the designation "Corp." "Inc." o "chartered," "professional association," or the abbrevia	or "Co". A p	npany," or "incorpo professional corpora	rated" or the abbreviat tion name must conta	ion "Corp.," in the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	NA		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	N A		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		s in Florida, enter t	he name of the	
Name of New Registered Agent		·		-
	(Florida street	address)		G
New Registered Office Address:			, Florida	('ode)
	<i>(</i> C.	ity)	εχιρ	(Coae)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	am familiar wit.			
Signatu	ire of New Keg	istered Agent, if chai	nging	

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>P.L</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change	P	Edward Folz	2155 Nova Village Dr
Add			Davie FL 33317
Remove			
2)Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary), (Be specific)	
111 A	
NIR	
	
	.
	
	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N'.4)	
(y noi applicable, inaicale N A)	(
NA	
W 1/7	
	
	
	

Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement
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by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement
must be separately provided for each voting group entitled to vote separately on the amendment(s);
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Typed or printed name of person signing) President (Title of person signing)

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