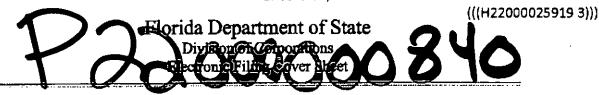
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Division of Corporations



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(((H220000259193)))



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To:

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Fax Number

: (850)617-6380

: ASSURED ACCOUNTING AND TAX SERVICES Account Name

Account Number : 120180000048 Phone : (954)793-0353 ; (954)944-3163

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: <u>SEVENSTARPOOLSERVICE@YAHOO.COM</u>

COR AMND/RESTATE/CORRECT OR O/D RESIGN SEVEN STAR POOL SERVICE, INC.

C. BRUMBLEY

C 45 4 65044 6	A
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Page Count	97
Estimated Charge	\$35.00

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Help

(((H22000025919 3)))

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	Articles of Am	endment	_	•	•
	to Articles of Inco	rporation *	•	>	
	of .	•			
SEVEN STAR	POOL SERVICE, INC	C.			
(Name of	Corporation as currently	filed with the Florid	la Dept. of State)		
	P2200000084	0			
	(Document Number of	Corporation (if know	n)	 -	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corpor	ation adopts the fo	Howing amendment(s)	to
A. If amending name, enter the new name	me of the corporation:				
				The new	
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	orp," "Inc," or "Co". A	mpany," or "Incorpo professional corpor	orated" or the abbr ation name must	eviation "Corp.," contain the word	
B. Enter new principal office address, it	f applicable:				
(Principal office address MUST BE A ST	KEEI ADDRESS)				
				2022	
		 ,		022 JAN 20	
C. Enter new mailing address, if applic	able:			*	_
(Mailing address MAY BE A POST O	FFICE BUA			<u> </u>	_
				~~~ 1	7
			_ .	<u> </u>	7
		es in Florido anter	the name of the	22	
D. If amending the registered agent and new registered agent and/or the new	registered office address:	35 th Piorius, Lines	me name or tile	- •	
	JULIA ALEXANDRA	KOSTAI			
Name of New Registered Agent	JOLIA ALEXANDIVA	100111			
;	375 FAIRWAY ISLES LN (Florida stre	at addragal			
	•	et daaress)		34212	
New Registered Office Address:	BRADENTON	Cir. A	, Florida	(Zip Cods)	
	(1	Çity)		(Lip Code)	
·					
New Registered Agent's Signature, if ch	anging Registered Agent:				
I hereby accept the appointment as registe	red agent. I am familiar w	ith and accept the ob	ligations of the pos	sition.	
Juli	a Kostal				
	a Kestal Signature of New Re	oistered Avent if che	moine	·	
:	Digitalare of Ire# No.	givenes rigority if the	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

Check if applicable

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

(((H22000025919 3)))
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> <u>John</u>	<u> </u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	President	Rita de Cassia Balieiro Aguiar	375 Fairway Isles Ln
Add			Bradenton, FL 34212
X Remove			
2) Change	<u>Presiden</u> t	Julia Alexandra Kostal	375 Fairway Isles Ln
X Add			Bradenton, FL 34212
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

If amending or addi	ng additional Art	icles, enter change	(s) here:		(((H22000025919
Attach additional she	eets, if necessary).	(Be specific)	 		
Please Add FEIN:	87-4388483				
 					 -
					
					
	-				
	-				
<u>.</u>		<u> </u>			
					
		. <u> </u>			
 -					 -
					
				-	
					·
If an amendment pi	rovides for an exc	hange, reclassifica	tion, or cancellation	of issued shares.	
provisions for imp	lementing the amile, indicate N/A)	endment if not con	tained in the amend	ment itself:	
(3.2.2)	,				
				,	<u></u>
			·		
	,				

The date of each	h amendment(s) adoption:
date this docume	
Effective date it	f applicable:
	(no more than 90 days after amendment file date)
Note: If the dat document's effect	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as office date on the Department of State's records.
Adoption of An	cendment(s) (CHECK ONE)
The amendm	ent(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder of required.
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.
☐ The amendm	ent(s) was/were approved by the shareholders through voting groups. The following statement trately provided for each voting group entitled to vote separately on the amendment(s):
"The m	umber of votes cast for the amendment(s) was/were sufficient for approval
ъу	(voting group)
	(voting group)
	Dated January 17, 2022
	-OW
	Signature Rita amier (Jan. 17, 2022 11:28 (53)
	(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)
	RITA DE CASSIA BALIEIRO AGUIAR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)