## 151200005171

Office Use Only



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12/27/23--01042--016 \*\*35.00

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: GREY CUSTOM I	POOLS INC.			
DOCUMENT NU	D22000005121				
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	rrespondence concerning this ma	tter to the following:			
	GRETEL REY		_		
		Name of Contact Persor	1		
	GREY CUSTOM POOLS INC.				
		Firm/ Company			
	13151 NW 11 TERRACE				
	Address				
	Miami, FL 33182				
		City/ State and Zip Code	е		
	GRETEL@	<b>DGREYCUSTOM</b>	POOLS.COM		
	E-mail address: (to be us	sed for future annual report	notification)		
For further informa	tion concerning this matter, pleas		_) 514-3400		
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

## Articles of Amendment to Articles of Incorporation of

GREY CUSTOM POOLS INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P22000005121	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:	(s) to
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)	
	3
	.,
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, Florida	
(City) (Zip Code)	
N. D. C. LA. O. S. A. W. L. D. Canada Laura.	
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

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	Name	Address
1) Change		NORIEL SANTANDER	13151 NW 11 TERRACE
X Add			MJAMI, FL 33182
Remove			
2) Change			Warra V. Carrier and Carrier a
Add			
Remove 3) Change			
Add			1
Remove			
4) Change		<del>-</del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)	
Noriel Santander needs to be added as V of the company with	n a 10% share
Torier Garitander Needs to be added as V or the company with	14 10 /0 311410.
·	
	<del></del>
f an amendment provides for an exchange, reclassification, or cancellation of issued shar	es.
provisions for implementing the amendment if not contained in the amendment itself:	<del></del>
(if not applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·
	****

The date of each amendment(s) adoption:	11/20/2023	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	8/1/2023	
(ne	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not n document's effective date on the Department of Sta		his date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
The amendment(s) was/were adopted by the inco- action was not required.	orporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr		ment(s)
☐ The amendment(s) was/were approved by the shamust be separately provided for each voting gro	areholders through voting groups. The following soup entitled to vote separately on the amendment(s)	
"The number of votes cast for the amendm	ent(s) was/were sufficient for approva	
by		
(voting	group)	
Dated 11/20/2023		
Dated11/20/2023		•
Signature	Jelly -	; ; ;
	t or other officer - if directors or officers have not	
- •	rator - if in the hands of a receiver, trustee, or other	r court
appointed fiduciary by	that fiduciary)	<del>-</del> .
GRETEL REY		- - -
(Тур	ped or printed name of person signing)	
P	RESIDENT	<u>,                                    </u>
<del></del>	e of person signing)	