Division of Corporations

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(((H22000188489 3)))



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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ALL PHASE WATERPROOFING INC.

Certificate of Status	U
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Page Count	06
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(((H22000188489 3))) **COVER LETTER** TO: Amendment Section Division of Corporations NAME OF CORPORATION: <u>ALL PHASE WATERPROOFING INC.</u> DOCUMENT NUMBER: P22000032449 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LISA ADAMS Name of Contact Person LICENSES ETC., INC. Firm/ Company 27911 CROWN LAKE BLVD, SUITE # 211 Address BONITA SPRINGS, FL 34135 City/ State and Zip Code SUPPORT@LICENSESETC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 239 ) 777-1028 Area Code & Daytime Telephone Number LISA ADAMS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: X \$35 Filing Fee ☐ \$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

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

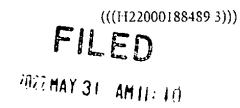
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

is enclosed)

From, Ocenses Cic.

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Articles of Amendment to Articles of Incorporation of



ALL PHASE WATERPROOFING INC.	SECRETARY
(Name of Corporation as current	SECRETARY OF STATE
P22000032449	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
Enter new principal office address, if applicable:	16320 NW 37TH AVENUE
Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI GARDENS, FL 33054
	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16320 NW 37TH AVENUE
	MIAMI GARDENS, FL 33054
<ol> <li>If amending the registered agent and/or registered office add new registered agent and/or the new registered office address</li> </ol>	
Name of New Registered Agent	
	rees addresss
(Florida str	
(Florida sti	, Florida

Signature of New Registered Agent, if changing

theck if applicable

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

-ax Page; 5 of 7 2022-05-3 i 20:05:10 GM1 nror

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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 Doe		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) X Change	<u> </u>	TROY BELL	16320 NW 37TH AVENUE	
Add			MIAMI GARDENS, FL 33054	
Remove				
2) X Change	_VP	RANDELL SMITH	16320 NW 37TH AVENUE	
Add			MIAMI GARDENS, FL 33054	
Remove Change				
Add				
Remove				
4) Change	<del></del>			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	(((I-122000188489 3))
If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Attach additional sneets, if necessary). (be specific)	
<del> </del>	· · · · · · · · · · · · · · · · · · ·
<del></del>	
16	and the same of the same and the same
If an amendment provides for an exchange, reclassification, or ca provisions for implementing the amendment if not contained in	
(if not applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·

From Ocenses Etc.

		(((H22000188489 3)))
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :	· · · · · · · · · · · · · · · · · · ·	
	(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this bl document's effective date on the De		e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	pted by the incorporators, or boa	rd of directors without shareholder action and shareholder
☐ The amendment(s) was/were ador by the shareholders was/were suf		umber of votes east for the amendment(s)
		th voting groups. The following statement a separately on the amendment(s):
"The number of votes cast i	or the amendment(s) was/were	ufficient for approval
by	(voting group)	.,,
	7	
selected	oy Bell ector, president or other officer	- if directors or officers have not been ands of a receiver, trustee, or other court
	TROY BELL	
-	(Typed or printed nar	ne of person signing)
	P	
-	(Title of person signi	ng)