Paa 0 000 50549

(December 18 Messe)				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

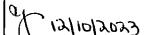
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2023 NOV 21 NH 8: 1



COVER LETTER

• TO: Amendment Section Division of Corporations

1

NAME OF CORPOI	RATION: HDEAL PLUMBIN	NG PROS, INC.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Salvatore Tavolacci		
		Name of Contact Persor	1
	Pioneer plumbing services lle	c	
		Firm/ Company	
	521 sunset lakes drive		
		Address	
	Mermitt Island, FL 32953		
		City/ State and Zip Code	
	Pioneerplumbingservices@g	mail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas		<u>591-5416</u>
	CC D	at (³²¹	_)
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

of

IDEAL PLUMBING PROS. INC.

IDEAL PLUMBING PROS, INC.	2023 : 101/21 Att 8: 17
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P22000050549	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
PIONEER PLUMBING, INC	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 professional corporation name must contain the word
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)	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr Name of New Registered Agent	
(Florida	strect address)
New Registered Office Address:	. Florida
The Median Chica Median	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (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>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u> </u>	<u></u>
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additi ttach additional sheets, if neo	cessary). (Be spe	ecific)			
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<u></u>					· · · · · · · · · · · · · · · · · · ·
					
	·-	<u>,,, , , , , , , , , , , , , , , , , , </u>			
					
· 					······································
an amendment provides for implementing (if not applicable, indica	g the amendment	eclassification, of not containe	or cancellation of d in the amendm	issued shares, ent itself:	
	-				
			<u></u>	_	
- 					

The date of each amendment(s) ad date this document was signed.	option:	, if other than th
SAN	Е	
Effective date if applicable:	(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
must be separately provided for	oved by the shareholders through voting groups. To each voting group entitled to vote separately on the or the amendment(s) was/were sufficient for approximately.	amendment(s):
N1/A	••	, al
<i></i>	(voting group)	→
NOVEMBI Dated	R 11, 2023	7
(By a di selected	ector, president or other officer – if directors or offi by an incorporator – if in the hands of a receiver, to difiduciary by that fiduciary)	
	DARRIELLE TAVOLACCI	
	(Typed or printed name of person signing	g)
	FRO	
	(Title of person signing)	-