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(Keq	uestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Summit Plumbing	Inc	
DOCUMENT NUMI	BER: ## 23	00001583	0
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	etter to the following:	
	Tyler Tompkins		
		Name of Contact Person	<u> </u>
	Summit Plumbing Inc.		
		Firm/ Company	
	1102 NW 8th Terrace		
		Address	
	Cape Coral FL , 33993		
		City/ State and Zip Cod	e
For further informatio	Tompkinsspi@gmail.com E-mail address: (to be u n concerning this matter, plea	sed for future annual report	notification)
Tyler Tompkins	of Contact Person	at (239	288-1609
Name	of Contact Person	Area Co	de & Daytime Telephone Number
	or the following amount made []\$43.75 Filing Fee & Certificate of Status		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 iahassee, F1, 32314	Ameno Divisio The C 2415	Address Innent Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

Summit Plumbing, Inc.

(Name of Corporation as	s currently filed with the Florida Dept. of State)
Unknown P23000015830	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
Not Applicable.	The new
name must be distinguishable and contain the word "corpor	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1102 NW 8th Terrace
(Principal office address MUST BE A STREET ADDRES	(SS) Cape Coral, FL 33993
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	F102 NW 8th Terrace
	Cape Coral, FL 33993
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent 1102 NW 8th Te	
Nume to present the present the second secon	
	Florida street address)
New Registered Office Address: Capo Card	
New Registerea Office Madress:	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	took A garate
Thereby accept the appointment as registered agent. Lam	
N/A	
Signature	of New Registered Agent, if changing
Check if applicable	

[I] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	PT	John Doc	
X Remove	У	Mike Lones	
X Add	SY	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	V	Kaithin Tompkins	1102 NW 8th Terrace, Cape Coral
x . Add			11. 33993
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			1.444
Add			
Remove			
6) Change			
Add			
Remove			

<u>It amend</u> Attach <i>aa</i>	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
ot Applical	able.	
 .		
If an ame	nendment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisio</u>	ions for implementing the amendment if not contained in the amendment itself:	
	not applicable, indicate N/A)	
ot Applicat	able.	
		
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The date of each amendment(s) adoption: 1/4 if other than the date this document was signed.
Effective date if applicable: N/A
(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 east for the amendment(s) by the shareholders was/were sufficient for approval.
FI 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 east for the amendment(s) was/were sufficient for approval
by
(voting group)
Signature Tyler Toupking (Byd director, president or other officer if directors or officers have not been
Signature Tyler Toupking. (By 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)
Tyler Tompkins
(Typed or printed name of person signing)
Owner, President
(Title of person signing)