P230000 25067

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE
TALLAHASSEF FI



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ALAIN SEPTIC &	: PLUMBING CORP			
DOCUMENT NUN	P23000025067	<u></u> -			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	IRKA DUCASSE BLANES				
	Name of Contact Person				
	DUCASSE TAX SERVICE CORP				
		Firm/ Company			
	7205 CORAL WAY				
		Address	·		
	1200	City/ State and Zip Code	<u> </u>	E B	202
	MIAMI, FL 33155	(31,5) Same and Eq. (60)	•	CRE	8
	E-mail address: (to be us	sed for future annual report	notification)	오르	_
For further informati	ion concerning this matter, plea	786	839-4429	ECRETARY OF STAT TALLAHASSEE, FL	2024 OCT 15 PH 4: 36
Name	e of Contact Person	at ()at ()		— m	
	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
At Di P,	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ALAIN SEPTIC & PLUMBING CORP

ALAIN SEPTIC & PLUMBING CORP					
	ation as currently	y filed with the Florida l	Dept. of State)		
P23000025067		140			
(Doc	ument Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this I	Florida Profit Corporatio	n adopts the followi	ng amendment((s) to
A. If amending name, enter the new name of the	corporation:				
				The new	
name must be distinguishable and contain the word ' "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abb	ic," or "Co". A				
B. Enter new principal office address, if applicat					
(Principal office address <u>MUST BE A STREET Al</u>	<u>ndke99</u>)				
C. P. C.					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>80X</u>)	<u> </u>			
				(2	
				SEC 7A	202
					2021 OCT 15 PM 1.
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.			name of the	ETARY OF LAHASSEE	7
	.u omet auaress.	<u>.</u>		SSI	- ·
Name of New Registered Agent	 _			– EE,	X i
	/Florida stre			_ 77 Å	
	er wrau sire	ea aaaress)		THE 36	ζ
New Registered Office Address:		(City)	, Florida (Zip	Coder	
		• '	,		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	legistered Agent:	, with and assent the obline	tions of the position		
i nervoy accept the appointment as registerea agent	, ram jaminar s	чин ана ассері іне отіда	aons of the position.		
				_	
Sig	znature of New Re	egistered Agent, if changi	ng		
Check if applicable					

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)

Add

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.

Example: X Change PΤ John Doe X Remove \underline{V} Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Name 1 <u>Address</u> (Check One) VPMARGARITA HERNANDEZ CARI 18601 SW 98TH AVE 1) ____ Change CUTLER BAY, FL 33157 _ Add Remove 2) ____ Change __ Add __ Remove ___ Change __ Add _ Remove 4) ____ Change Add _ Remove 51 ____ Change __ Add Remove 6) ____ Change

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

	10/08/2024	
The date of each amendment(s	s) adoption:	_, if other than the
date this document was signed.		
	10/08/2024	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by.		\sim
ъу	(voting group)	
Dated Signature	10/8/20. Sold asel-	2024 OCT SECRET
(By	a director, president or other officer - if directors or officers have not been	TAL CRI
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court	A OC.
app	ointed fiduciary by that fiduciary)	>
	JOSE H CABALLERO	ETARY CLAHASS
	(Typed or printed name of person signing)	
	DIVIDADA PARTE	E.S. ti
	PRESIDENT	₽₹ 2

(Title of person signing)