P23000029892

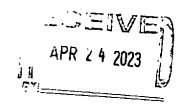
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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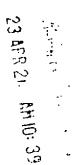


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04/25/23--01005--020 **43.75



07/13/2023 SC



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: SPARKING POOI	, SERVICES INC		
	1BER:		 	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Caleb Sparkman			
		Name of Contact Persor	1	
	SPARKLING POOL SERVI	CES INC		
	•	Firm/ Company		
	1009 Chatham Ct			
		Address		
	Safety Harbor, FL 34695			
		City/ State and Zip Cod	e	
	calebsparkman@gmail.com			
		sed for future annual report	notification)	
For further informati	ion concerning this matter, plea	se call: at (300-7614	
Name	e of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio 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

SPA	RKING	POOL	SERVICES	INC

(Name of Corporation as co	urrently filed with the Flo	orida Dept. of State)	
P23000029892			
(Document Nu	ımber of Corporation (if kr	own)	
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit Corp</i>	poration adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporat	tion:		
SPARKLING POOL SERVICES INC			The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc," or "Cohartered," "professional association," or the abbreviation	Co". A professional corp		tion "Corp.,"
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>			
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 Name of New Registered Agent		ter the name of the	23 MPR 24 AH 10: 40
			— CD +;
(Flo	orida street address)		
New Registered Office Address:	(City)	, Florida	ip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	1 Agent:		,
	CM D : La :-		
Signature oj	f New Registered Agent, if	changing	
Check if annlicable			

☐ 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)

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 <math>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.

Frample:

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
I) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				<u> </u>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add			<u> </u>	
Remove				

	ng or adding additional Ar litional sheets, if necessary)		<u> </u>		
	.				
	_				
<u>-</u>					
·					
			-		
F Ifan ame	ndment provides for an ex	change reclassific	ation or cancellati	an af iceand charec	
provisio	is for implementing the an	nendment if not eg			
(if n	ot applicable, indicate N/A)				
·					

The date of each amendmen date this document was signed	• • • • • • • • • • • • • • • • • • • •	, if other than the
date this document was signed	-4/18/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirement he Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareho	older action and shareholder
	re adopted by the shareholders. The number of votes cast for the amere sufficient for approval.	endment(s)
	re approved by the shareholders through voting groups. <i>The following d for each voting group entitled to vote separately on the amendmen</i>	·
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
-4/18/ Dated Signature	Cirll T	
(I s	By a director, president or other officer – if directors or officers have elected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Caleb Sparkman	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	