## P23000030485

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(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)  (Document Number)	07/10/23010170
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## COVER LETTER

**TO:** Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address City/ State and Zip Code or future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

## Articles of Incorporation

L.I. Plumbina Inc.		
(Name of Corporation as currently filed with the Florida Dept. of State)		
7737DDDD030485		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendi	ment(s) t
A. If amending name, enter the new name of the corporation:		
	The n	ete.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	n "Corp	 
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)		-
	23 JU	 - 2*
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	$\overline{\Box}$	
new registered agent and/or the new registered office address:	7	•••
Name of New Registered Agent	جر	٠.
	. ယ	
(Florida street address)		
New Registered Office Address:, Florida		_
(City) (Zip C	lode)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	-	
Signature of New Registered Agent, if changing		
Check if applicable  The amendment(s) is/arc 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)

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> 44</u>	John Doe		
X Remove	<u>Y</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		LUISE	E. Ledesma k	hobles
Add				
Remove 2) Change	P	LUISE	Ledesmai	Robles
_X^Add				
Remove 3) Change				
Add				
Remove				
4) Change Add	<del></del>	<u></u>	<del> </del>	<del></del>
Remove				
5) Change		·		
Add				
Remove				
6) Change		-		
Add				
Remove				

• . . . . E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

					<del></del>
an amendment j	orovides for an exchan	ige, reclassification	on, or cancellation	n of issued shares,	
rovisions for im	olementing the amend	ment if not conta	ined in the amen	dment itself:	
(if not applica	hle, indicate N/A)				
					<u> </u>
		<del></del>	- ,.		
			•		
			<u> </u>		

The date of each amendment(s) adoption: \( \begin{aligned} \lambda & \lambda	r than the
Effective date <u>if applicable</u> :	-
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	ed as the
Adoption of Amendment(s) (CHECK ONE)	
I The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholde action was not required.	:r
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ 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 cast for the amendment(s) was/were sufficient for approval by LUSE. Lecles ma Hobles "  (voting group)	
Signature  Signature  By a 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)  [Typed or printed name of person signing)  Tresident  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)	