P24000011954

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SECRETARY OF STATE
TALLAHASSEE EL

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: OCEAN PEARL I	POOL SERVICE INC.		
	1BER: P24000049884			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	ADONIS VALDES ACOST.	A		
		Name of Contact Person		
		Firm/ Company		
	5987 FOREST HILL BLVD	APT 206		
	GREENACRES,FL 33415	Address		
		City/ State and Zip Code		
	OCEANPEARLPOOLSERV	ICE@GMAIL.COM		
	E-mail address; (to be us	sed for future annual report i	notification)	
For further information	on concerning this matter, pleas	se call: at (、891-6678	2024 AUG 22 PH 1: 50 SECRETARY OF STATE TAILAHASSEE, FL
Name	of Contact Person	at (Area Cod	_) e & Daytime Telephone Number	- 1 AS
Enclosed is a check for	or the following amount made		,	PM 141 OF ST SEE, F
S35 Filing Fee	☐\$43.75 Fifing 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)	SO ATE
Am Div P.O	iling Address cendment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Division The Cei 2415 N.	ddress nent Section of Corporations ntre of Tallahassee Monroe Street, Suite 810 see, FL 32303	

Articles of Amendment to Articles of Incorporation of

	ation as currently filed with the Flo	orida Dept. of State)		
P24000049884				_
(Doc	cument Number of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006. Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corp</i>	paration adopts the follo	owing amendn	nent(s) t
A. If amending name, enter the new name of the	e corporation:			
			The ne	w
name must he distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "In "chartered," "professional association," or the abl	tc," or "Co". A professional corp	rporated" or the abbreworation name must co	wiation "Corp., mtain the wor	rd
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET A</u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE E</u>	<u>BOX</u>)			
D. If amending the registered agent and/or registered new registered agent and/or the new registere	tered office address in Florida, entoed office address:	er the name of the	SECRETARY O	2024 AUG 22
Name of New Registered Agent			AHAS	22
	(Florida street address)		— (S. S. S	
No Designer of OVO			EE'S	PH 1: 50
New Registered Office Address;	(City)	Florida //	Zip Colle)	50
New Registered Agent's Signature, if changing Re	egistered Agent: . I am familiar with and accept the o			

Signature of New Registered Agent, if changing

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)

Remove

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mikę Jones		
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	<u>P</u>	VALDES ACOSTA, LIVAN		
Add				
X Remove				
2) Change				
Add				
Remove Change				
Add				
Remove			——————————————————————————————————————	}~ { 2024 AUG
4) Change				AUG 22 PI
Add			AHAS	22
Remove			SO CH	_3 <u>.</u>
5) Change			E, FL	PM 1: 50
Add				0
Remove				
6) Change				
Add				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
REMOVE			
VALDES ACOSTA, LIVAN			
		- 7	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	SECT TA	2024 AUG 22 PM	~[]
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SECRETARY OF TALLAHASSEE	UG 2/	أسامي
	<u> </u>	2 PM	
	75	1: 50	ومويداة
	ر ندر	JE O	
			
			

The date of each amendmen ate this document was signed		, if other than the
	 - 08/06/2024	
Iffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	ill not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action as	nd shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	08/06/2024	
So	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Adonis Valdes Acost	2024 AUG 22 SECRETAR TALLAHA
	(Typed or printed name of person signing)	En la
	President	HA 22
	(Title of person signing)	AY OF ST
		1: 50 E. FL
		THE O