## P9200015498

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## **COVER LETTER**

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Tallahassee, FL 32301

2661 Executive Center Circle

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: NHERFLOWLANDSPRINKLERS, THE DOCUMENT NUMBER: P92000015498
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  Name of Contact Person  Name of Contact Person  Firm/ Company  Address  Address  City/ State and Zip Code  Accounting - HHER-Loug Jampagay, RR, Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at ( ) 273 - 2063  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ S35 Filing Fee ☐ S43.75 Filing Fee & ☐ S43.75 Filing Fee & ☐ Certificate of Status ☐ Certified Copy (Additional copy is enclosed) ☐ Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

## Articles of Amendment

to

Articles of Incorporation

7 11150 Jan Jan 2000 2/2/100
(Name of Corporation as currently filed with the Florida Dept. of State)
( ) A A A CH ST Red With the Florida Dept. of State)
(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 amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent  Antalygelo Awrelece.  (Florida street address)
New Registered Office Address: AUJSOH (City) Florida (Zip Code)
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

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 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	PT John D	<u>oe</u>			
$\underline{X}$ Remove	V Mike Jones				
X Add	<u>SV</u> <u>Sally S</u>	mith_			
Type of Action (Check One)	<u>Titie</u>	Name	Address		
1) Change	$\mathcal{D}^{-}$	SANZANGELO, LARRY	<del></del>		
Add Remove					
2) Change Add	$\sum$	SONZAHSELO, LAMBINE	4348 HARODEPOINTEDR PORt Richey		
Remove 3) Change Add			FL, 34668		
Remove 4) Change Add					
Remove  5) Change Add					
Remove б) Change					
Add					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/4)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(ij noi applicable, indicate NA)	

The date of each amendment(s) adoption:, if other date this document was signed.	han the
Effective date if applicable:	
(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 liste document's effective date on the Department of State's records.	ias the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ 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'''	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Q \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
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)	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	