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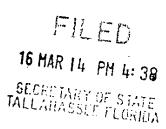
COVER LETTER

TO: Amendment Section Division of Corporations

j

NAME OF CORPOR	ATION: Swimming Pools E	By Ike Jr., Inc.	
DOCUMENT NUMB	POSUUUUSSOUS		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	•
	Paul G. Schlichte, Esq.		
-	,	Name of Contact Person	1
	Ray A. Schlichte, Jr. P. A.		
-	·	Firm/ Company	
	2134 Hollywood Blvd.		
-		Address	
	Hollywood, Florida 33020		
-		City/ State and Zip Cod	e
pschli	chte@schlichtelaw.com		
	•	sed for future annual report	notification)
	`	•	,
For further information	concerning this matter, pleas	se call:	
Paul G. Schlichte, Esq		at (923-4604
Name o	f Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



Swimming Pools By Ike Jr., Inc.

(Name o	f Corporation as currently	filed with the Florida I	Dept. of State)	
P93000033908				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporatio	n adopts the following amendn	nent(s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or "C	o". A professional cor		on .
B. Enter new principal office address, i (Principal office address MUST BE A ST				
	·			
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C				
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter the	name of the	
Name of New Registered Agent	Erik Eikevik			
	1513 N.W. 58th Ave.			
	(Florida stre	et address)		
New Registered Office Address:	Margate,		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	ered agent. I ap familiar w	ith and accept the obligation of the control of the		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</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	P	Rebecca Eikevik	6781 N.W. 117th Ave.
Add			Parkland, Fl. 33067
X Remove			
2) Change	S	Hellen Hauck	6781 N.W. 117th Ave.
Add			Parkland, Fl. 33067
X Remove			-
3) Change .	PD	Erik Eikevik	1513 N.W. 58th Ave.
X Add			Margate, Fl. 33063
Remove			 .
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	1000
	
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	W
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	and the second s
provisions for implementing the ame	nament it not contained in the amendment itseit:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itseit:
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The date of each amendment(s) adoption:, if other than
date this document was signed.
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 listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
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
Signature Relucca Publish
(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)
Rebecca Eikevik
(Typed or printed name of person signing)
President
(Title of person signing)