## P94000031705

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Amendac

MAR 0.7 2016

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	A.J.'S PLUMBIN	NG, INC.	
DOCUMENT NUMB	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	Leslie H. Dubuisson		
•		Name of Contact Person	n
	A.J.'s Plumbing Inc.		
•		Firm/ Company	
	P.O. Box 1666		
•		Address	
	Santa Rosa Beach, FL 32459		
•		City/ State and Zip Cod	e
ajsplu	mbinginc@embarqmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Leslie H. Dubuisson		at (	231-1473
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment 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)
	ing Address		Address
Amendment Section		Amendment Section	
	sion of Corporations  Box 6327	Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

	to Articles of Inc	corporation		2. A.
a.J.'S PLUMBING, INC.	of	•	<u> </u>	Soften Co
	f Corporation as current	ly filed with the Flori	do Dont of State)	
P94000031765	Corporation as current	ly med with the Flori	ua Dept. of State)	30/6/4/2 PH 3:01
	(Document Number o	f Corporation (if know	n)	- 10,
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpor	ation adopts the following	amendment(s) to
If amending name, enter the new na	me of the corporation:			
ot Applicable				The new
me must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or	'Co". A professional		
Enter new principal office address,	f applicable:	Not Applicable		
rincipal office address <u>MUST BE A S</u>				
Enter new mailing address, if appli (Mailing address MAY BE A POST of		Not Applicable		
If amending the registered agent an			the name of the	
new registered agent and/or the new		<u>s:</u>		
Name of New Registered Agent	Leslie H. Dubuisson			
	(Florida str	reet address)		
New Registered Office Address:	998 BAY DR, SANTA RO	OSA BEACH	Florida 32459	
		(City)	(Zip C	ode)
ew Registered Agent's Signature, if cl	nanging Registered Agent	<u>:</u>		

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	<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>	Address
1) Change	P	Anthony J Dubuisson	998 BAY DR
Add			SANTA ROSA BEACH, FL 32459
X Remove			
2) Change	P	Leslie H. Dubuisson	998 BAY DR
X Add			SANTA ROSA BEACH, FL 32459
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del> </del>
6) Change			
Add			
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
N/A	
7 16	have a substitute of the state
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

	her than the
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 document's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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.	
February 29, 2016	
Dated	
Signature Lister The Millerson	
(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)	
10	
Leslie H. Dubuisson	
(Typed or printed name of person signing)	<del>_</del>
Administrator of the Estate of Anthony J Dubuisson	
(Title of person signing)	