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OCT 3 0 2013 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations Phillips RIE Sprinklers, Inc. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IIPS FOR SPYINKLEY SW 148th AUTHUE City/State and Zip Code B-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certified Copy Certificate of Status

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy (Additional Copy

is enclosed)

· ·	Articles of Amendment	FILED	
	to Articles of Incorporation	- -	
- lo: Il a - 0: -	of	30, 23 熱 形: 46	
DNITTIPS FIVE S	prinklers, Inc.	SECRETARY OF STATE	
(Name of Corporation as cu	Frently filed with the Florida Dept. of Sta	ALLAHASSEE, FLÖRIDA	
P95000090	182		
(Document N	lumber of Corporation (if known)		
ursuant to the provisions of section 607.100 s Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(
. If amending name, enter the new name	e of the corporation:		
		The new	
"Corp.," "Inc.," or Co.," or the designation or "chartered," "professional association	n," or the abbreviation "P.A."	nal corporation name must contain the	
. Enter new principal office address, if a			
 Enter new principal office address, if a Principal office address <u>MUST BE A STRI</u> 	EET ADDRESS)		
C. Enter new mailing address, if applicate (Mailing address)	<u>EET ADDRESS</u>)		
Principal office address MUST BE A STR	<u>EET ADDRESS</u>)		
Principal office address MUST BE A STRI	ble: FICE BOX		
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Principal office address MUST BE A STRI	ble: FICE BOX) or registered office address in Florida, en	ter the name of the	
Principal office address MUST BE A STRI	ble: FICE BOX) or registered office address in Florida, en	ter the name of the	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) D. If amending the registered agent and/o new registered agent and/or the new recommendation.	EET ADDRESS) ble: FICE BOX) or registered office address in Florida, en	ter the name of the	
Principal office address MUST BE A STRICT. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) Mailing address MAY BE A POST OF (Mailing address MAY BE A POST OF) If amending the registered agent and/or the new registered agent	ble: FICE BOX) or registered office address in Florida, en	ter the name of the	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) D. If amending the registered agent and/o new registered agent and/or the new recommendation.	EET ADDRESS) ble: FICE BOX) or registered office address in Florida, en	ter the name of the	

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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>ce Jones</u>	
X Add	SV Sall	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>	Esquibel Bernal	17580 NW 67MplacE,
Add Remove			miami, FL 33015
2)Change		Avelino Gonzalez	17425 NW 75th place # 107
Remove			HidEah, FL 33015
3) Change			
Add			
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

If amending or addit	<u>ng additional Arti</u>	cies, enter change	(s) here:		
Attach additional she	ets, if necessary).	(Be specific)			
					
			 		
				 	
If an amandment an	ouidas fan an avak	anna madassifias	tion or concelled	lan of langed show	***
If an amendment pr provisions for impl	ementing the ame	ndment if not con	tained in the am	andment itself:	es,
(if not applicable	le, indicate N/A)	nament ii not con	tained in the am	endment itseir.	
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The date of each amendment(s) adoption: October date this document was signed.	er 13,2013	_, if other than the
Dalala	K/ 1st 2013	
Effective date if applicable: (no more than 9)	90 days after amendment file date)	-
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders thromust be separately provided for each voting group entitled to		
"The number of votes cast for the amendment(s) was/wer	ere sufficient for approval	
oy(voting group)	.,,	
(voting group)		
ne amendment(s) was/were adopted by the board of directors action was not required.	s without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators with action was not required.	hout shareholder action and shareholder	
Dated 10 11 13		
Signature Signature		
(By a director, president or other office	icer - if directors or officers have not been	_
selected, by an incorporator – if in the appointed fiduciary by that fiduciary)	he hands of a receiver, trustee, or other court	
	- 7 ()	
(Typed or p	printed name of person signing)	_
(Typed of p	prince name of person signing)	
Corpor	are socretary.	_
TTA	ITTE AT DORCAD ELECTION	