

P96000004139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

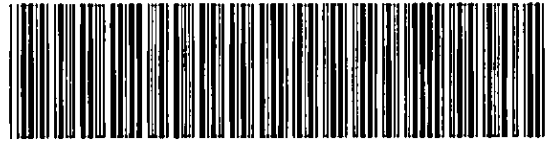
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800354448118

11/06/20--01010--002 **35.00

CHS

Amend

DEC 15 2020

ALBRITTON

Worman & Sheffler, P.A.
Attorneys At Law

2707 W. Fairbanks Ave., Suite 200
Winter Park, Florida 32789

Telephone (407) 843-5353
Facsimile (407) 841-9516

October 28, 2020

Sent via U.S. Mail

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Partin Plumbing Services, Inc. | W&S File No.: 5698.0000

Dear Sirs:

Enclosed for filing, please find the Articles of Amendment to Articles of Incorporation of Partin Plumbing Services, Inc.

I have also enclosed our firm's check in the amount of \$35.00 representing the filing fee for the Articles of Amendment.

Please return all correspondence concerning this matter to the undersigned at my office address listed above.

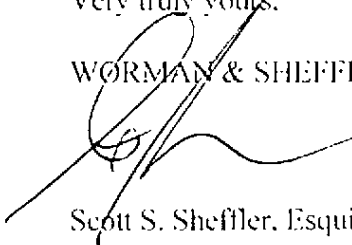
The email address to which your department should send future annual report notifications is: partinplumbing@gmail.com.

For any further information concerning this matter, kindly contact me.

Thank you for your cooperation with regards to this matter.

Very truly yours,

WORMAN & SHEFFLER, P.A.


Scott S. Sheffler, Esquire

SSS/np
Enclosure
cc: Regina Partin-via email

PARTIN PLUMBING SERVICES, INC.

P96000004139

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|--------------|--------------------------|--|
| 1) <input type="checkbox"/> Change | <u>P</u> | <u>William W. Partin</u> | <u>440 Baker Ave, Altamonte Springs,</u> |
| <input type="checkbox"/> Add | | | |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input checked="" type="checkbox"/> Change | <u>PST</u> | <u>Regina Partin</u> | <u>440 Baker Avenue</u> |
| <input type="checkbox"/> Add | | | <u>Altamonte Springs, FL 32714</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. 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/A)

October 27, 2020

The date of each amendment(s) adoption: _____, if other 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 listed as the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

10/27/2020
Dated _____

Signature Regina Partin
(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)

Regina Partin, Director

(Typed or printed name of person signing)

Director

(Title of person signing)