

P97000000826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000240574570

Amend

10/12/12--01016--010 **52.50

FILED
2012 OCT 25 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/25/12

COVER LETTER

TO: Amendment Section
Division of Corporations

S CORPORATION

NAME OF CORPORATION: GROVES SWIMMING POOL SERVICE, INC.

DOCUMENT NUMBER: P97000000826

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

R. BRYAN GROVES

Name of Contact Person

Firm/ Company

1161 TWIN OAK, CT

Address

MARCO I FL 34145

City/ State and Zip Code

GROVESPOOLSERVICE@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. BRYAN GROVES

Name of Contact Person

at (239) 642 9372

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2012

R. Bryan Groves
1161 Twin Oak Ct.
Marco Island, FL 34145

SUBJECT: GROVES SWIMMING POOL SERVICE, INC.
Ref. Number: P97000000826

We have received your document for GROVES SWIMMING POOL SERVICE, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The first page of the amendment form is missing. I have enclosed a blank page 1 for you to fill out and return to us when you resubmit the entire document. Please check only ONE box under "adoption of amendment" on page 4 of the amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 512A00025669

RECEIVED
12 OCT 25 AM 11:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

GROVES SWIMMING POOL SERVICE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

2012 OCT 25 AM 8:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P97000000826

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NA

The new

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)

NA

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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

NA

(Florida street address)

New Registered Office Address:

_____, Florida _____

(City)

(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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="radio"/> Change	D	P. BRYAN GROVES	1161 TURN OUL CH MARCO ISL 34145
<input type="radio"/> Add			
<input type="radio"/> Remove			
2) <input checked="" type="radio"/> Change	VP	MICHELLE M. GROVES	//
<input type="radio"/> Add			
<input type="radio"/> Remove			
3) <input checked="" type="radio"/> Change	SEC	JILL M. GROVES	//
<input type="radio"/> Add			
<input type="radio"/> Remove			
4) <input type="radio"/> Change			
<input type="radio"/> Add			
<input type="radio"/> Remove			
5) <input type="radio"/> Change			
<input type="radio"/> Add			
<input type="radio"/> Remove			
6) <input type="radio"/> Change			
<input type="radio"/> Add			
<input type="radio"/> Remove			

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

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

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)

JAMES & MACQUISHINE GROVES	8
BRYAN & MICHELLE M GROVES	90
JILL M GROVES	10
	<hr/> 100

The date of each amendment(s) adoption: 9-1-2012

Effective date if applicable: 9-1-2012
(no more than 90 days after amendment file date)

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

Ronald Bryan Groves
(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 9/25/2012

Signature

Ronald Bryan Groves
(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)

Ronald Bryan Groves

(Typed or printed name of person signing)

President

(Title of person signing)