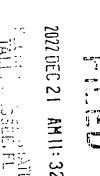
## P970000 74319

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Danisos Zinny Harrey				
(Document Number)				
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Special Instructions to Filing Officer:				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: Blue 1 Gg 00 V	Pools + Spas inc				
DOCUMENT NUMBER: 79700074	319				
The enclosed Articles of Amendment and fee are submitted for fil	ing.				
Please return all correspondence concerning this matter to the following	owing:				
John Scott Name of Co	Anderson				
Blue lagoon tools + Spas inc					
16821 72nd RI	• •				
Ad	dress				
losahatchee T	1. 33 470 and Zip Code				
	nnual report hotification)				
For further information concerning this matter, please call:					
John Scott Anderson at a	954) 416 5392				
Name of Confact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the	Florida Department of State:				
S35 Edling Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified (Additiona enclosed)	Copy Certificate of Status				
Mailing Address	Street Address				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation of

2022 DEC 21 AM 11: 32

BLUE LAGOON POOLS & SPAS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
P97000074319
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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
(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

Check if applicable

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

Example:

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	1
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<del></del>		
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
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4) Change			
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f an amen	dment provides for an exchange, reclassification, or cancellation of issued shares, s for implementing the amendment if not contained in the amendment itself:
(if not	applicable, indicate N/A)
· <1	helbi Elizabeth King 10224 holly
	ove dr. Fort Worth to 76108 Sold
3/2	TOUR FOR FOR THE TOUR SOIL
	er 20% of Shares to John Sutt
$A_n$	derson for th amont of 41,00
	ing Brooke Anderson 1572 NW 90th way
7	Abroke Pines A. Sold 20% Shaves
10010	
	Juhn Scott Anderson for the amont of \$1.00

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 10/26/2002	
Effective date if applicable: 10/26/20.2 (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
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	
by	
Signature  (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)	_
John Scott Anderson (Typed or printed name of person signing)	
President	
(Title of person signing)	