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PICK-UP WAIT	MAIL
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(Business Entity Name)	<u> </u>
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SECRETARY OF STATES
TALLAHASSEE, FLORIDA

SEP 0 7 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: All-State Plumb	ning Services, Inc.
DOCUMENT NUMBER: P98000050464	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	 matter to the following:
Joel Casimiro	
All-State Plumbing Servio	Name of Contact Person
<u> </u>	Firm/ Company
540 E Minnehaha Ave.	
Clermont, Fl 34711	Address
	City/ State and Zip Code
allstplumbing@yahoo.com	
E-mail address: (to b	used for future annual report notification)
For further information concerning this matter, p	lease call:
Joel Casimiro	at (352) 874-4225
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State;
\$35 Filing Fee Certificate of Statu	
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 Tallahassec, FL 32301

Articles of Amendment to Articles of Incorporation of

All-State Plumbing Services, Inc.		
(Name of Co	rporation as currently filed with the Florida Dept. of State)	
P98000050464		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of		
		au.
	the word "corporation," "company," or "incorporated" or "Corp," "Inc," or "Co". A professional corporation name "or the abbreviation "P.A."	
B. Enter new principal office address, if ap		-
(Principal office address <u>MUST BE A STRE)</u>	E <u>T ADDRESS</u>)	
new registered agent and/or the new reg	registered office address in Florida, enter the name of the	FILED 17 SEP - 1 PH 8: 23 SLOCKET LICT OF STATES IALLANIASSEL, FLORIDA
New Registered Office Address:	(City), Florida_	(Zip Code)
		(Др Соне)
New Registered Agent's Signature, if chang	ing Registered Agent: agent.—I am familiar with and accept the obligations of the pos	***
т негелу ассерсте арронитен ах гезумегеа :	agent. I am jaminar with and accept the obligations of the pos	tuon.
	Signature of New Registered Agent, if changing	

Executive Officer: CFO held. President, Treasure Changes should be noted	rector titl President = Chief I r, Directo in the fo wes the c	le by the first l t: T= Treasurd Financial Offi or would be P llowing manne orporation, So	er: S= Secretary; D= Director; TR= i cer. If an officer/director holds more TD. er. Currently John Doe is listed as the illy Smith is named the V and S. These	Trustee: C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change.
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>Nar</u>	me 	Address
1) Change	<u>V</u>	An	drew Martinez	540 E Minnehaha Ave.
X Add				Clermont, Fl 34711
Remove				
2) Change				
Add		:		
Remove				
3) Change		_		
Add				7
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remaye				

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:

E. If amending or adding additional Articles,	enter change(s) here:
(Attach additional sheets, if necessary). (Be	specific)
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F. It an amendment provides for an exchange provisions for implementing the amendme	reclassification, or cancellation of issued shares, of its interest in the amendment itself:
(if not applicable, indicate N/A)	No. 100 Control of the Control of th

• •	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
7/27/2017 Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed as the tate's records.
Adoption of Amendment(s) (CHE	IL ECK ONE)
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes east for the amendment(s) proval.
	shareholders through voting groups. The following statement troup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	 ment(s) was/were sufficient for approval
by	
(voti	ng group)
☐ The amendment(s) was/were adopted by the b action was not required.	oard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the ir action was not required.	
7/27/2017 Dated	
Signature	The same
(By a director, presid	lent or other officer – if directors or officers have not been
selected, by an incor appointed fiduciary	by that fiduciary)
Joel Casimire	
	ped or printed name of person signing)
President	
	(Title of person signing)