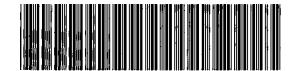
# P1900007450

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	C
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SECRETARY OF STATE
TALLARASSEE, FLORE

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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION (X) Exact Plymbing, Inc.,			
DOCUMENT NUMBER: P990000 7450			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person			
Exact Plumbing Inc. Firm/Company			
400 S. SANFORD AVE Address			
Son for J. FL 32771  City/ State and Zip Code  in Son Cl xoct dumbinging . Com  E-mail address: (to be used for fluture annual report notification)			
For further information concerning this matter, please call:    Juon Turner at (401) 948-9048			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)			
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Clifton Building  Fallahassee, FL 32314  Control of Executive Center Circle  Tallahassee, FL 32301			

### Articles of Amendment to Articles of Incorporation of

Fract	Plumbing.	Tar
LXACI	I 'UMBING .	エハし、ノ

(Name of Corporation as cur	rently filed with the Florid	la Dept. of State)		
· · · · · · · · · · · · · · · · · · ·	•			
(Document Nu	00 <i>00</i> 0 <b>7450</b> mber of Corporation (if kno	own)		
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:			adopts the fo	llowing
A. If amending name, enter the new name	of the corporation:			
			The ne	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr	e designation "Corp," "Inc	c," or "Co". A profession	orated" or the nal corporation:	e n
B. Enter new principal office address, if ap			<u></u> <u>≯</u> .	
(Principal office address MUST BE A STRE	ET ADDRESS )		35.00 20.00	SE.
	·	_	**************************************	<u>.</u>
,	•		— <u>m~</u>	19 PH
C. Enter new mailing address, if applicable			FS.	19 PM 4: 03
(Mailing address MAY BE A POST OFF)	<u> </u>			
•			<b>∵</b>	
	<u></u>	· · · · · · · · · · · · · · · · · · ·	···	
D. <u>If amending the registered agent and/or</u> new registered agent and/or the new reg		n Florida, enter the name	of the	
new registered agent and/or the new reg	istered office address.			
Name of New Registered Agent:	<del></del>			
New Registered Office Address:	(Florida street d	address)		
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if change				
I hereby accept the appointment as registered	agent. I am familiar with a	and accept the obligations o	of the position.	
•	Signature of New Registered	d 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)

<u>Tit</u>			Address	Type of Action
Tre	asurer X	Kathy Woodward	8)400 S. Santurd Avenue Santina Florida, 32-171	Add Remove
				□ Add □ Remove
		ding additional Articles, ento heets, if necessary). (Be spe		
F.	provisions for im		eclassification, or cancellation of the first field of the	
<u></u>				

The date of each amendment(s) adoption: (X) 10/13/11
Effective date if applicable: (date of adoption is required)
(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"
by"  (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 (X) 1013/4
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)
(Typed or printed name of person signing)
President (Title of person signing)

### COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: Tekgiants, Inc.	
	(Name of Corporation)
DOCUMENT NUMBER: P050	000021600
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
Anthony Greco	
(Name of Pers	on)
Tekgiants, Inc.	
(Name of Firm/Co	mpany)
280 Wekiva Springs Road, Suit	e 1050
(Address)	<del></del>
Longwood, FL 32779	
(City/State and Zi	o Code)
For further information concerning	this matter, please call:
Anthony Greco	at ( 321 ) 206-6376 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	e payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

### OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Dana Dearth	, hereby resign asChief Information Officer
"	(Title)
of Tekgiants, Inc	
	of Corporation)
P05000021600 (Document Number, if known)	_, a corporation organized under the laws of the State of
Florida	_•

### **FILING FEE IS \$35.00**

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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