P94000100636

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	199000100636 Inc.
DOCUMENT NUMBER:	999000100636
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
	CONA
	Name of Contact Person
	CONIA VAN
	Firm/ Company
	185 Airport Real, Svite C
	Madicss
	NAME, Pla 34105
	City/ State and Zip Code
	KAMERINETTE P. amail com
E-mail address: (to	KAYENIVETTE C quail. (om o be used for future annual report hotification)
For further information concerning this matter	-, please call:
Chris CONA	at (739) 234-6822
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fe Certificate of Sta	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

	01	
Privette	Plumbing	Inc

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

A. If amending name, enter the new name of the co	orporation;	
		The ne
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional co	corporated" or the abbreviation "Corp., rporation name must contain the wor
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADI</u>	EDRESS)	
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>	
. If amending the registered agent and/or register new registered agent and/or the new registered Name of New Registered Agent		nter the name of the
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Lip Code)
	zistered Agent:	e obligations of the position.

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)

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	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Kaye Privette	96/ Wilson Blud 1
X Add	1	V	NAPles, Fla 34121
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u></u>
Remove			
6) Change			
Add			
 -			
Remove			

(Attach additional sheets, if nee	cessary). (Be specific)
•	
	
· If an amandment arapides for	or an exchange, reclassification, or cancellation of issued shares,
provisions for implementing	g the amendment if not contained in the amendment itself:
(if not applicable, indicat	te N/A)
-	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(ho mere than 90 days afte	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of diaction was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through votin must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficie	nt for approval
by	
(voting group)	
Dated	
Signature	<u> </u>
(By a director, president or other officer – if directed, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
Chris ConA	
(Typed or printed name of po	erson signing)
Allone	1 med FBN 0141178
(Title of person signing)	