

562145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

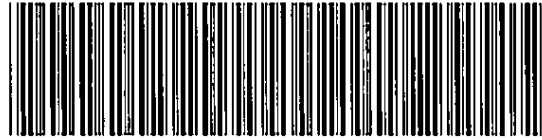
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400415812794

Amend

2023 SEP 18 PM 1:10
FALLAHASSEE, FLORIDA

2023 SEP 18 PM 1:10

FILED

2023 SEP 18 AM 11:26
FALLAHASSEE, FLORIDA

2023 SEP 18 AM 11:26

FILED

A. RAMSEY
SEP 19 2023



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 09/18/2023

Name: CHRIS

Reference #: 2121979

Entity Name: POOL DOCTOR SERVICE & SUPPLIES INC.

Articles of Incorporation/Authorization to Transact Business

Amendment

Change of Agent

Reinstatement

Conversion

Merger

Dissolution/Withdrawal

Fictitious Name

Other CERTIFIED COPY UPON FILING

Authorized Amount: \$43.75

Signature:

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Pool Doctor Service & Supplies, Inc.

DOCUMENT NUMBER: S62145

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

Please return all correspondence concerning this matter to the following:

Pamela Uran
Name of Contact Person

Fredrikson & Byron, P.A.
Firm/ Company

60 South 6th Street, Suite 1500
Address

Minneapolis, MN 55402
City/ State and Zip Code

hdenbar@go-npp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Uran at (612) 492-7731
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
- \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED
2023 SEP 18 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pool Doctor Service & Supplies, Inc.

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

S62145

(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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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 N/A

(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) (c), 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.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>CEO</u>	<u>Augusto Titarelli</u>	<u>1715 N Westshore Blvd</u>
<input type="checkbox"/> Add			<u>Unit 390</u>
<input checked="" type="checkbox"/> Remove			<u>Tampa, FL 33607</u>
2) <input type="checkbox"/> Change	<u>CEO</u>	<u>Hal Denbar</u>	<u>1715 N Westshore Blvd</u>
<input checked="" type="checkbox"/> Add			<u>Unit 390</u>
<input type="checkbox"/> Remove			<u>Tampa, FL 33607</u>
3) <input type="checkbox"/> Change	<u>CFO</u>	<u>Dave Knutson</u>	<u>1715 N Westshore Blvd</u>
<input checked="" type="checkbox"/> Add			<u>Unit 390</u>
<input type="checkbox"/> Remove			<u>Tampa, FL 33607</u>
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

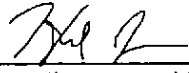
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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 _____"
(voting group)

Dated 9/15/2023

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)

Hal Denbar

(Typed or printed name of person signing)

Chief Executive Officer

(Title of person signing)