## V65314

(Re	equestor's Name)				
(Ac	ddress)				
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(Ci	ty/State/Zip/Phone	e #)			
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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JUL 0 3 2017 D CUSHING

## **COVER LETTER**

TO: Amendment Section Division of Corpora	tions			,	
NAME OF CORPORA	TION: <u>AIR CONZ</u>	SITIONING PL	us INC	dba Pool HE	EATERS PLUS
DOCUMENT NUMBE	r: <u>V65315</u>	<del>/</del>		2	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
	DELA	ANEA OUE ON Name of Contact Person	LETTE		
_	AIR CONDITIO	ONING PLUS Firm/Company	Inc db	a POOL H	EATERS PLUS
_	8001 61	RAND CANA Address	the De		
	MIAHI, I	City/ State and Zip Code	<i>j</i>		
<del></del>		ed for future annual report			
For further information c	oncerning this matter, pleas	se call:			
Delanea	Ovellette	at ( 305 Area Coo	) <u>a6a</u>	5010	7. F.
Name of	Contact Person	Area Co	de & Daytime Te	lephone Number	
Enclosed is a check for the	ne following amount made p	payable to the Florida Depa	rtment of State:		U OF STATE PM 12: 07
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Certificate of Certified Cop (Additional Copies enclosed)	Status Dy	- ) <del>K</del> S
Amend	g Address ment Section on of Corporations	Amend	Address ment Section n of Corporations	;	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

## **Articles of Incorporation**

of

with the Florida Dept. of State)	
ration (if known)	
ration (if known)	
Profit Corporation adopts the follow	ring amendment(s) t
NIA	The new
A professional corporation name mus	abbreviation at contain the
N/A	
N/A	31VIS:
Clorida, enter the name of the	RETARY OF CONTROL OF THE CONTROL OF
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	93 High
ess)	_
, Florida	
	p Code)
	Profit Corporation adopts the follows  N/A  company," or "incorporated" or the A professional corporation name mus  N/A  Florida, enter the name of the  ress)

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: 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>Name</u>	<u>Addres</u> s
1) Change	<u>v/s</u>	Kyle Ouellette	8001 GRAND CANAL DR NIAMI FL 33144
Add		,	NIAMI FL 33144
X Remove			
2) Change	V/5	Delanea OuelleHe	8001 GRAND CANAL DR MIANI FL 33144
_X_ Add			MIANI FL 33144
Remove			
3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ts, if necessary,	). (Be specific)				
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f an amendment prov provisions for implen	ides for an ex	change, reclassi	fication, or cancellat	ion of issue	d shares,	
provisions for impler	indicate N/A)	nenament 11 not	contained in the am	enament itse	<u> </u>	
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The date of each amendment(s) adoption:date this document was signed.	June 1	2017	, if other than th
Effective date <u>if applicable</u> :	no more than 90 days aft	er amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this block does not document's effective date on the Department of Sta		ntory filing requirements	, this date will not be listed as th
Adoption of Amendment(s) (CHEC	CK ONE)		
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	areholders. The number or	of votes cast for the amer	ndment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro			
"The number of votes cast for the amendm	nent(s) was/were sufficier	nt for approval	
by(voting	g group)		
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without sl	hareholder action and sh	areholder
☐ The amendment(s) was/were adopted by the incaction was not required.	orporators without shareh	nolder action and shareho	older
Dated			
Signature Dula	nea Quellette		
(By a director, presider	nt or other officer – if direction if in the hands of that fiduciary)		
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	esident Seco	<b>C</b> <i>C</i> ,	swer