176698

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	÷#)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Miller Electric Company				
DOCUMENT NUMBER: 176698				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Susan A. Walden				
	Name of Contact Person			
Miller Electric Company				
	Firm/ Company			
2251 Rosselle Street				
	Address			
Jacksonville, FL 32204				
	City/ State and Zip Code			
swalden@mecojax.com				
	used for future annual report notification)			
L-man address. (to be	asca for facure annual report nonneactors)			
For further information concerning this matter, pl	ease call:			
Susan Walden	at (904) 981-0221			
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 Secretificate of Status				
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			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Miller Electric Company	& Back
(Name of Corporation as curren	atly filed with the Florida Dept. of State)
176698	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	"Co". A professional corporation name must contain the
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 ad new registered agent and/or the new registered office addre	
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

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Asst S	Brent T. Zimmerman	2251 Rosselle St
x Add			Jacksonville, FL 32204
Remove			
2) Change	Asst. T	Rochelle B. Price	2251 Rosselle St
x Add			Jacksonville, FL 32204
Remove			
3) Change			
Add			
Remove			•
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament is not contained in the amendment users.
N/A	
T-0	

	. 02/01/2017	
The date of each amendmen date this document was signed		, if other than the
T100 (1 3 (10 11 11	02/01/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this defined the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
■ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
02/01 Dated	/2017	
Signature _	Busan a Walden	
	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other cou	
	ppointed fiduciary by that fiduciary)	rt.
	Susan A. Walden	
	(Typed or printed name of person signing)	
	Secretary-Treasurer	
	(Title of person signing)	