# MIZZZ

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | ddress)            | <del></del> |
| (Ac                     | ddress)            |             |
| (Ci                     | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (В                      | usiness Entity Nar | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | Certificates       | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
| ·                       |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



200258545122

04/04/14--01026--012 \*\*35.00

INVESTOR OF CHAPTER ATTENTION 14 MPR -4 PH 3: 14 RECEIVED

14 APR -4 . AM 9: 43

C. LEWIS APR 7 2014 EXAMINER

## CORPORATE ACCESS,

[]When you need ACCESS to the world[]

INC.

236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

| 1              |   | WALK IN        |
|----------------|---|----------------|
|                | PICK  | UP: 4/3 GLINDA |
|                | CERTIFIED COPY                              |                |
| ×              | РНОТОСОРУ                                   |                |
|                | cus   |                |
| <b>\</b>       | ( FILING                                    | AMEND          |
| 1.             | HORSEPOWER ELE<br>(CORPORATE NAME AND DOCUM | ECTRIC INC.    |
| 2.             | (CORPORATE NAME AND DOCUM                   | 1ENT #)        |
| 3.             | (CORPORATE NAME AND DOCUM                   |                |
| 4.             |   | ,              |
| 5.             | (CORPORATE NAME AND DOCUM                   | IENT #)        |
|                | (CORPORATE NAME AND DOCUM                   | IENT #)        |
| 6.             | (CORPORATE NAME AND DOCUM                   | IENT #)        |
| SPECI<br>INSTR | IAL<br>RUCTIONS:                            |                |
|                | <del></del>                                 |                |
|                |   |                |
|                |   |                |

#### APPROVED AND FILED

14 APR -4 MM 9:43 -

Articles of Amendment
to
Articles of Encorneration

SECRETARY OF STATE TALLMHASSEE, FLORIDA

| EHIJA          |
|----------------|
|                |
|                |
|                |
|                |
| admont(s) û    |
|                |
| neny           |
| ailón<br>n the |
|                |
|                |
|                |
|                |
|                |
|                |
|                |

If amending the Officers und/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, Saily Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Saily Smith, SV as an Add.

| X,Chango                      | PI        | <u>John Doe</u>   |                   |  |
|-------------------------------|-----------|-------------------|-------------------|--|
| <u>X</u> Rетроуе              | <u>v</u>  | Mike Jones        |                   |  |
| X Add                         | <u>sy</u> | Sally Smith       |                   |  |
| Type of Action<br>(Check One) | Title     | Name              | Address           |  |
| 1) Change                     | D         | Hector P. Ortiz   | 8105 W. 20 AVENUE |  |
| Add                           |           |                   | HIALEAH, FL 33014 |  |
| Remove                        |           |                   |                   |  |
| 2) Change                     | S/D       | LINDA ORTIZ       | 8105 w, 20 AVENUE |  |
| Add                           |           |                   | HIALEAH, FL 33014 |  |
| Remove                        |           |                   |                   |  |
| 3) Change                     | D         | HECTOR M. ORTIZ   | 8105 W. 20 AVENUE |  |
| Add                           |           |                   | HIALEAH, FL 33014 |  |
| Remove                        |           |                   |                   |  |
| 4) Change                     | D/VP      | HUMBERTO C. ORTIZ | 8105 W. 20 AVENUE |  |
| Add                           |           |                   | HIALEAH, FL 33014 |  |
| Remove                        |           |                   |                   |  |
| 5) Change                     | P         | MICHAEL MARTINEZ  | 8105 W. 20 AVENUE |  |
| Add                           |           |                   | HIALEAH, FL 33014 |  |
| Remove                        |           |                   |                   |  |
| 6) Change                     | VP        | FERNANDO NAVARO   | 8105 W. 20 AVENUE |  |
| Add                           |           | · <u> </u>        | HIALEAH, FL 33014 |  |
| Removo                        |           |                   |                   |  |

| (Attach ac    | ing or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)  |
|---------------|---|
| ARTICLE       | III is deleted in its entirety and replaced with the following:   |
|               |   |
| ARTICLE       | Al  |
| The corpo     | ration shall engage in activity of business permitted under the laws of the   |
| Jnited Sta    | ates and the State of Florida provided, however, no loans, sale of stocks   |
| and/or sal    | e of assets other than in ordinary course of business shall be permitted  |
| vithout the   | e prior written consent of Hector P. Ortiz and/or Linda Ortiz.  |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
| - <u></u>     |   |
| <del></del> - |   |
|               |   |
|               |   |
|               |   |
| If an ame     | ndment provides for an exchange, reclassification, or cancellation of issued shares,<br>is for implementing the amendment if not contained in the amendment itself: |
| if no         | of applicable, indicate N/A)  |
| <del></del>   |   |
|               |   |
|               | <u> </u>  |
| _             |   |
|               |   |
|               |   |
|               |   |
|               |   |

### APPROVED AND FILED

### 14 APR -4 AM 9: 43

|   | SECRETARY OF STATE   |                     |
|---|--|---------------------|
| The date of each amendment(s) adoption;date this document was signed.                               | TALLAHASSELIFLERIDA  | , if other than the |
| Effective date if applicable:   |  | <del></del>         |
| (no   | more than 90 days after amendment file date)   | •                   |
| Adoption of Amendment(s) (CFECE   | CONE)  |                     |
| The amendment(a) was/were adopted by the share<br>by the shareholders was/were sufficient for appro | cholders. The number of votes east for the amendment(s) wal.   |                     |
| The amendment(s) was/were approved by the sha<br>must be separately provided for each voting grou   | rcholders through voting groups. The following statement op entitled to vote separately on the amendment(s):                       |                     |
| "The number of votes cast for the amendmen  | at(s) was/were sufficient for approval   |                     |
| by  | 19   |                     |
| (voting g   | тоцр)  |                     |
| The amendment(s) was/were adopted by the board action was not required.                             | i of directors without shareholder action and shareholder  |                     |
| The amendment(s) was/were adopted by the incor-<br>action was not required.                         | porntum without anarcholder action and anarcholder   |                     |
| Dated 4-3-14 Signature  |  |                     |
| (By a director, prosident   | or other officer is directors or officers have not been stor-if in the hands of a receiver, trusted, or other court nat fiduciary) | <del></del>         |
| MICHAEL M   | ARTINEZ  |                     |
| *   | (Typed or printed name of person signing)  | <del></del>         |
| PRESIDENT   | / Director   |                     |
|   | (Title of person signing)  | <del>_</del>        |