

P10000094959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

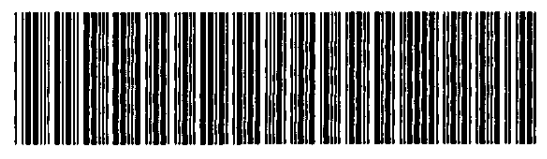
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400210831974

08/11/11--01004--027 **43.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 11 PM 2:37

Amend/ce
@ 8/15/11

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: FLORIDA LIGHTING AND TRAFFIC, INC.

DOCUMENT NUMBER: P10000094959

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

Please return all correspondence concerning this matter to the following:

WILLIAM PINO
Name of Contact Person

FLORUIDA LIGHTING AND TRAFFIC, INC.
Firm/ Company

7035A SW 47th Street
Address

MIAMI, FL 33155
City/ State and Zip Code

TFITZGERALD@THEMLSGROUP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THAIS FITZGERALD at (305) 666-4210 X 110
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Florida
~~FLORIDA~~ LIGHTING AND TRAFFIC, INC.

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

P10000094959

(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:

_____ *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**)

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

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: _____

New Registered Office Address: _____ (Florida street 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 11 PM 2:37

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>S</u>	<u>ROY BUSTILLO</u>	<u>14237 SW 45TH STREET</u> <u>MIAMI, FL 33175</u>	<input type="checkbox"/> Add - change <input type="checkbox"/> Remove
<u>T</u>	<u>MAINNOR PINO</u>	<u>16178 121ST TERR NORTH</u> <u>JUPITER, FLORIDA 33478</u>	<input type="checkbox"/> Add - change <input type="checkbox"/> Remove
<u>V-P</u>	<u>ROY J BUSTILLO</u>	<u>11775 SW 102ND STREET</u> <u>MIAMI, FL 33186</u>	<input type="checkbox"/> Add - change <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The officers of the company are the same individuals just their titles have changed.

Therefore I have not checked the add or remove boxes because that is not applicable.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: August 1st, 2011

Effective date if applicable: August 1st, 2011 (date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

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.

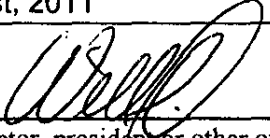
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

“The number of votes cast for the amendment(s) was/were sufficient for approval
by _____.”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated August 1st, 2011

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)

William Pino
(Typed or printed name of person signing)

President
(Title of person signing)