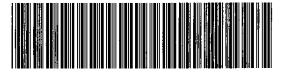
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

Please return all correspondence concerning this matter to the following:  Massimo Maffei Name of Contact Person  Premier Structural Systems Incompany  III 28 Palmetto Rudge Dr Address  Name of Contact Person  Premier Structural Systems Incompany  III 28 Palmetto Rudge Dr Address  Cityl State and Zip Code  Max a premier plastering by 2  E-mail address: (to be fised for future annual report notification)  For further information concerning this matter, please call:  Physics Maffei at (239) 348 92 99  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:  Certificate of Status	NAME OF CORPORATION:Prej	mier Structural	Systems Inc
Please return all correspondence concerning this matter to the following:  Massimo Maffer  Name of Contact Person  Premier Structural Systems In a supplier of States of Status  Firm/ Company  11128 Palmetto Rudge Dr  Address  Ad	DOCUMENT NUMBER:	1000059411	
Premier Structural Systems Incompany  III 28 Palmetto Rodge Dr  Address  Name of Contact Person  Premier Structural Systems Incompany  III 28 Palmetto Rodge Dr  Address  Name of Contact Person  City/ State and Zip Code  Max Dremier Dastering, bl 2  For further information concerning this matter, please call:  Physics State and State Code & Daytime Telephone Number  Area Code & Daytime Telephone Number  Cinclosed is a check for the following amount made payable to the Florida Department of State:  Certificate of Status  Certificate Of Status  Certificate Copy  (Additional copy is enclosed)	The enclosed Articles of Amendment and fee	are submitted for filing.	
Premier Structural Systems Inv  Firm/ Company  III 28 Palmetto Ruge Dr  Address I  Address I  City/ State and Zip Code  Max a bremier please call:  Premail address: (to be used for tuture annual report notification)  For further information concerning this matter, please call:  Area Code & Daytime Telephone Number  Area Code & Daytime Telephone Number  Cinclosed is a check for the following amount made payable to the Florida Department of State:  As Filling Fee Secrificate of Status  Certificate of Status  Certificate Copy (Additional copy is enclosed)	Please return all correspondence concerning th	nis matter to the following:	
Firm/ Company  11128 Palmetho Ridge Dr Address	<u> </u>	<u> </u>	
FL 34/10  City/ State and Zip Code  MAX ON PEMILEVE AS FEVING by 2  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  MA FL 239 348 92 99  Name of Contact Person at (239) 348 92 99  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount made payable to the Florida Department of State:  Certificate of Status   \$43.75 Filing Fee & Certificate of Status   \$52.50 Filing Fee Certificate of Status   Certified Copy (Additional Copy is enclosed)	Premier.	Structural Syste	ms Inu
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:    Dyus   Market   at (239)   348 92 99     Name of Contact Person   Area Code & Daytime Telephone Number     Area Code & Daytime Telephone Number     State:   \$43.75 Filing Fee & Certificate of Status   Certified Copy (Additional Copy is enclosed)     Certified Copy (Additional Copy is enclosed)	<u>11128 Palme</u>	Ho Ridge Dr Address	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:    Dyus   Market   at (239)   348 92 99     Name of Contact Person   Area Code & Daytime Telephone Number     Area Code & Daytime Telephone Number     State:   \$43.75 Filing Fee & Certificate of Status   Certified Copy (Additional Copy is enclosed)     Certified Copy (Additional Copy is enclosed)	Naple	S FL 34/10 City/ State and Zip Code	
Area Code & Daytime Telephone Number	/   \		ig, b/z
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 & \$52.50 Filing Fee & Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Area Code & Daytime Telephone Number  \$52.50 Filing Fee & \$52.50 Filing Fee & Certificate of Status  Certificate of Status  (Additional copy is enclosed)	For further information concerning this matter	, please call:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is enclosed)	Phyllis Maffei Name of Contact Person		9299 lephone Number
Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)  (Additional Copy is enclosed)	Enclosed is a check for the following amount i	made payable to the Florida Depar	rtment of State:
Mailing Address Street Address		Certified Copy	Certificate of Status Certified Copy
Amendment Section Amendment Section	Mailing Address	Street Address	
Division of Corporations  P.O. Boy 6327  Clifton Building	Division of Corporations	Division of Corporations	

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Premier	Structural Systems, Inc.
(Name of Corporation as curr	rently filed with the Florida/Dept. of State
	1000059411
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following
A. If amending name, enter the new name of	of the corporation:
abbreviation "Corp.," "Inc.," or Co.," or the	The new the word "corporation," "company," or "incorporated" or the e designation "Corp," "Inc," or "Co". A professional corporation of the abbreviation "P.A."
B. Enter new principal office address, if ap	
(Principal office address <u>MUST BE A STREI</u>	ET ADDRESS )
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida (City) (Zip Code)
, , , , , , , , , , , , , , , , , , , ,	ing Registered Agent:  agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent, if changing
•	oignature 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)

Title Mr.	Name Cosidio DOrazio "Joc"	Address 684 110 <sup>th</sup> Ave N. Naples Fl 34108	Type of Action  Add Remove
			_
			_ □ Add □ Remove
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
provisio	nendment provides for an exchange, re ons for implementing the amendment it		
(if n	ot applicable, indicate N/A)	1	

The date of each amendment(s) ac	doption: 7 / 5/2011
` <b>,</b>	(date of adoption is required)
Effective date <u>if applicable</u> :	more than 90 days after amendment file date)
,,,,	······································
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	ng group)
(10)	ng group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder
Dated/	7/1/2011
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Fith of person signing)