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From:

Account Name : DANIEL HICKS, P.A.

Account Number : 0/5061003325 Phone : (352)351-3353 Fax Number : (352)351-8054

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BASIC AMENDMENT

COASTAL SITE WORKS, INC.

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ARTICLES OF AMENDMENT OF

COASTAL SITE WORKS, INC.

- 1. The undersigned is the sole incorporator of COASTAL SITE WORKS IN No shares have been issued and no other action of any nature has been undertaken by the Corporation.
- 2. The following provisions of the Articles of Incorporation of COASTAL SITE WORKS, INC., a Florida corporation, filed in Tallahassee on February 23, 1999 and assigned document number P99000017355, be and they are hereby amended in the following particulars:

Article I, be and it is hereby amended to read as follows:

ARTICLE I NAME AND ADDRESS

The name of the Corporation shall be: COASTAL UNDERGROUND SERVICES, INC.

The address of the principal office of the Corporation is: 2190 N. Crede Avenue, Crystal River, FL 34428 and the mailing address of the Corporation is: 2190 N. Crede Avenue, Crystal River, FL 34428.

Article VI, be and it is hereby amended to read as follows:

ARTICLE VI INITIAL BOARD OF DIRECTORS

The number of Directors constituting the initial Board of Directors is two (2). The number of Directos may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one.

Daniel Hicks, P.A. 421 South Pine Avenue Ocala, Florida 34471 Phone: (352) 351-3353 Fax No.: (352) 351-8054 Florida Bar No. 0145139 (((#99000011426 6))) (((H99000011426 6)))

3. The foregoing amendment was adopted by the incorporator of the Corporation on the 4th day of May, 1999.

IN WITNESS WHEREOF, the undersigned Incorporator of this corporation has executed these Articles of Amendment this <u>/</u> day of May, 1999.

COASTAL SITE WORKS, INC.

Y: NUMBER OF THE HAROLD Buckingham

STATE OF FLORIDA COUNTY OF MARION

I HEREBY CERTIFY on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Harold Buckingham, to me known to be the person described in and who executed the same for the purposes contained, that he is personally known to me.

WITNESS my hand and official seal in the County and State last aforesaid this day of May, 1999.

Notary Public

My Commission expires:

PAULA S. MILLER
SINOTARY)
My Comm Exp. 11/19/2000
No. CC 583550
I Personally Known (10ther LD.