# Requestor's Name Requestor's Name Address Address

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Integr	atedfacility Systems.	
2. <u> </u>	(Corporation Name) (Document #) (Corporation Name) (Document #)	<b></b>
3	(Corporation Name) (Document #)	3
4	(Corporation Name) (Document #)	
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NEW FILINGS	AMENDMENTS : S S D	
Profit	Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent	
NonProfit	Resignation of R.A., Officer/ Director	
Limited Liability		
Domestication	Dissolution/Withdrawal	
Other	Merger	

OTHER FILINGS
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Fictitious Name
Name Reservation

REGISTRATION/-QUALIFICATION
Foreign
Limited Partnership
 Reinstatement
Trademark
Other

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Examiner's Initials

CR2E031(1/95)

# ARTICLES OF AMENDMENT

### OF

## INTEGRATED FACILITY SYSTEMS

Pursuant to Section 607.1006, Florida Statutes, the Articles of Incorporation of the above-named Corporation are hereby amended

- The name of the Corporation shall remain and be INTEGRATED FACILITY SYSTEMS, Inc.
- 2. Article V of the Corporation's Articles of Incorporation is deleted in its entirety, and a new Article IV is hereby adopted, to read as follows:

### ARTICLE V

The street address of the principal office of this Corporation is 116 A Hamilton Park Drive, Tallahassee, Florida 32304.

- Except as expressly provided herein, the Corporation's Articles of Incorporation shall be and remain in full force and effect, and its present Registered Agent shall continue to serve in such capacity until his replacement is duly appointed and
- The amendment set forth above was adopted on September 25, 2002 by the unanimous vote of the shareholders of the Corporation, and was sufficient under Florida law to effect such

IN WITNESS WHEREOF, I, the undersigned, have executed these Articles of Amendment on this 25 day of September, 2002.

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STATE OF FLORIDA COUNTY OF LEON

The foregoing instrument was acknowledged before me this 25th day of School 2002, by Kelly C. Kearney, as President of Standard Saulty Lotons , on behalf of the Corporation. He/she is personally known to me or has produced FOLH K 650-503-65-784-0 as identification.

(SEAL)

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NOTARY PUBLIC - STATE OF FLORIDA

Print, Type or Stamp Name of Notary Public



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