Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240002185293)))



H240002185293ABC0

To:		
	Division of Corporations	•
	Fax Number : (850)617-6380	41
from:		
	Account Name : C T CORPORATION SYSTEM	,
	Account Number : FCA000000023	÷:
	Phone : (614)280-3338	
	Fax Number : (614)573-3996	
<b>.</b>	the email address for this business entity to be u	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN WESCO INTEGRATED SUPPLY, INC.

Certificate of Status	0
Certified Copy	ı
Page Count	04
Estimated Charge	\$43.75

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T9:

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607,1504, F.S.)

## SECTION I (1-3 MUST BE COMPLETED)

F	10000001407		
_	(Document number of cos	poration (if known)	
WESCO INTEGRATED SUPPLY, I	NC.		
(Name	of corporation as it appears on the	records of the Department of Sta	ie)
Delaware		3. 03/19/2010	
(Incorporated un		(Date authorized to do b	usiness in Florida)
	SECTIO	N II	
(	4-7 COMPLETE ONLY THE A	PPLICABLE CHANGES)	- •
4. If the amendment changes the name of incorporation 9 05/28/2024	of the corporation, when was the c	range effected under the laws of i	its jurisdiction of JUH 2
Vallen Integrated Supply, Inc.	<del>.</del>		泛
(Name of cornoration after the amen-	dment adding suffix "cornorating	" "company " or "meorporated "	or appropriate appreciati
not contained in new name of the cor	poration)	company, or meorporated,	or appropriate accreviate
			. 12
(If new name is unavailable in Florida	, enter alternate corporate name a	dopted for the purpose of transact	ting business in Florida)
If the amendment changes the po	ernod of duration, indicate new per	and of duration	
o. The amount of thinges the pr	and or distactor, martine new per	ioo or daramon.	
_			
	(New dura	tion)	
7 If the amendment changes the ju	risdiction of incorporation, indicat	e new jurisdiction.	
,	1, ,	<b>,</b>	
	(New jurisdi	ction)	•
	(, terr juitsoi	citony	
) 16 Bu .ab	od/ooolaa oo ahaa oo a	m n n n n n n n n n n n n n n n n n n n	
If amending the registered agent as new registered agent and/or the ne		rioriga, enter the name of the	-
Name of New Registered Agent	C T Corporation System		
Hant to then hogorored ligent	1200 South Pine Island Road	····	
	(Florida street ac		
P	lantation		3324
New Registered Office Address:	(City)	Florida 3	(Zip Code)
	•		•
New Registered Agent's Signature I hereby accept the appointment as re		h and accept the obligations of th	ne position.
The state of the second	Same Wednesd		· r
Signature of Nov. 1	Registered Agent, if changing	Sherry McGinnes, Assistant Se	ecretary
Signature of New I	ægisterea Agent, ij enanging	anerry McGinnes, Assistant Se	reieldly

9.	If	the amendment	t changes person,	title or	capacity	in accordance	with 607	.1504 (4	), indicate t	hat change
----	----	---------------	-------------------	----------	----------	---------------	----------	----------	---------------	------------

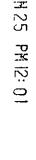
Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
<del></del> -			Add
			Remove
			Add
			L.Remove
	<del></del>		Likemove 25
			Likemove O
<del></del>			Add 1. 0
			L.Remove
			Add
10. Attached is a co- of the application under the laws o	rtificate or document of similar import, n to the Department of State, by the Secr it which it is incorporated	evidencing the amendment, authorietary of State or other official having	ticated not more than 90 days prior to delivery generated of corporate records in the jurisdiction
		Stephone Honay	
	(Signature of a dire a receiver or other	etor, president or other officer - it is court appointed fiduciary, by that f	n the hands of iduciary)
STEPHANIE I	HENCZ	VICE	PRESIDENT
(1	'yped or printed name of person signing'	) (T	itle of person signing)

FILING FEE \$35.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID WESCO INTEGRATED SUPPLY, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'VALLEN INTEGRATED SUPPLY, INC.' ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2024, AT 1:57 O'CLOCK P.M.





Authentication: 203782171

Date: 06-24-24