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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TARGET	ELECTRICAL SYSTEMS, JAC.			
DOCUMENT NUMBER:	684			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
KEULN D. S. Name o	HAFFER Contact Person			
TANGET ELECT	MICAL SYSTEMS, LAS.			
1536 FAIRW	Address			
	Address			
DUNEDIN, FC. 34698 City/ State and Zip Code				
E-mail address: (to be used for fi	e gmall, com uture famual report notification)			
	•			
For further information concerning this matter, pleas				
LEVIN D. SHAPFER	at (727) 430-9741			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**



TARGET ELECTRICAL (Name of Corporation as currently filed with the Florida Dept. of State) (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: SHAFFEL ELECTRICAL SYSTEMS, MC. 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) ر, Florida (City) New Registered Agent's Signature, if changing Registered Agent:

1

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

	ng the Officers and/or Directors, ent and title, name, and address of each	Officer and/or Director being	officer/director being
	ditional sheets, if necessary)	Omer and/or Director Dem	<u>g auueu.</u>
<u>Title</u>	<u>Name</u>	Address	Type of Action
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	amendment provides for an exchang		
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The date of each amendment(s) adoption:	9-13-11			
``	(date of adoption is required)			
Effective date <u>if applicable</u> :				
Effective date if applicable:				
Adoption of Amendment(s)	CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) or approval.			
	the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):			
"The number of votes cast for the am	endment(s) was/were sufficient for approval			
by	21			
by(voting group))			
action was not required.	the board of directors without shareholder action and shareholder the incorporators without shareholder action and shareholder			
action was not required.	and mediporators without shareholder action and shareholder			
Dated 9-13-11	······································			
Signature Kour	D-Slieffer			
(By a director, pre selected, by an inc	sident or other officer of directors or officers have not been corporator — if in the hands of a receiver, trustee, or other court y by that fiduciary)			
KE	Typed or printed name of person signing)			
(7	Typed or printed name of person signing)			
	ESIDENT			
(Title	e of person signing)			