

M 16 00000 2732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

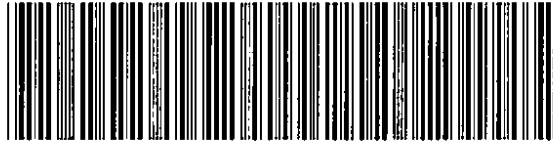
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300397358053

2022 NOV 15 PM 09:36

2022 NOV 15 AM 11:10

Handwritten signature and date: 11/17/2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 136180 5030276

AUTHORIZATION :

COST LIMIT : *Spillman*

ORDER DATE : November 15, 2022

ORDER TIME : 8:39 AM

ORDER NO. : 136180-005

CUSTOMER NO: 5030276

FOREIGN FILINGS

NAME: HMI TECHNICAL SOLUTIONS, LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

2017 015 9:37

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: HMI Technical Solutions, LLC

Enter new principal office address, if applicable: _____

**(Principal office address
MUST BE A STREET ADDRESS)** _____

Enter new mailing address, if applicable: _____
**(Mailing address
MAY BE A POST OFFICE BOX)** _____

2. The Florida document number of this limited liability company is: M16000002732

3. Jurisdiction of its organization: Pennsylvania

4. Date authorized to do business in Florida: 04/01/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: MasTec Professional Services, LLC
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____
Enter Florida Street Address

_____, **Florida** _____
City *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

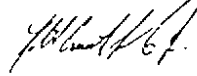
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Robert E. Apple, Manager

Typed or printed name of signee

Filing Fee: \$25.00

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T:717-787-1057
dos.pa.gov/BusinessCharities

Entity Name: MasTec Professional Services, LLC
Jurisdiction: PENNSYLVANIA **Issuance Date:** 11/15/2022
Entity No.: 0006367905 **Receipt No.:** 000250165
Entity Type: Domestic Limited Liability Company **Certificate No.:** 004838223

Document Listing

Image No.	Date Filed	Effective Date	Filing Description	No. of Pages
B0440-1358	11/14/2022	11/14/2022	Certificate of Amendment	1

** **** * End of list ***** **

I, Leigh M. Chapman, Acting Secretary of the Commonwealth of Pennsylvania, do hereby certify that the attached document(s) referenced above are true and correct copies and were filed in this office on the date(s) indicated above.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Leigh M. Chapman

LEIGH M. CHAPMAN
Acting Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov



0003561202



COMMONWEALTH OF PENNSYLVANIA
 Department of State
 Bureau of Corporations and Charitable Organizations
 PO Box 8722
 Harrisburg, Pennsylvania 17105-8722
**CERTIFICATE OF AMENDMENT - DOMESTIC
 LIMITED PARTNERSHIP / LIMITED LIABILITY
 COMPANY**
 Fee: \$70

Pennsylvania Department of State

-FILED-
 Amendment #: 0003561202
 Date Filed: 11/14/2022

B0440-1358 11/14/2022 9:15 AM Received by Pennsylvania Department of State

DSCB:15-8622/8822 (rev. 2/2017)

In compliance with the requirements of 15 Pa.C.S. § 8622 or 15 Pa.C.S. § 8822 (relating to amendment or restatement of certificate), the undersigned, desiring to amend or restate its Certificate of Limited Partnership/ Certificate of Organization, hereby states that:

File number	0006367905
Current filing name	HMI Technical Solutions, LLC
Filing type	Domestic Limited Liability Company
Current limited liability company subtype	Limited Liability Company
Initial File Date	02/23/2016

New limited liability company name	MasTec Professional Services, LLC
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Effective Date
 The filing shall be effective when filed with the Department of State

Current Registered Office or Commercial Registered Office Provider	
Search for Commercial Registered Office Provider (CROP)	Corporation Service Company Commercial Registered Office Provider
Venue and Publication County	Dauphin

Additional Details
 The amendment adopted by the association includes these additional changes (1000 characters or less):
 Article 1 is amended to read: "The name of the limited liability company is MasTec Professional Services, LLC"

Restated Certificate of Limited Partnership/Certificate of Organization

The restated Certificate of Limited Partnership/ Certificate of Organization supersedes the original Certificate of Limited Partnership/Certificate of Organization and all amendments thereto.

Electronic Signature
 I verify that I have electronically signed and submitted this document on behalf of the association.

IN TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate of Amendment to be executed by a duly authorized person.

Full Name	Title	Date
Robert E. Apple	Manager	11/14/2022

2022/11/11 Date: 11:00:00 AM Verification No.: 0003561202



0003561202



COMMONWEALTH OF PENNSYLVANIA
 Department of State
 Bureau of Corporations and Charitable Organizations
 PO Box 8722
 Harrisburg, Pennsylvania 17105-8722
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 LIMITED PARTNERSHIP / LIMITED LIABILITY
 COMPANY**
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Full Name	Title	Date
Robert E. Apple	Manager	11/14/2022

Certificate Verification No.: 004838223 Date: 11/15/2022



004838223



COMMONWEALTH OF PENNSYLVANIA
 Department of State
 Bureau of Corporations and Charitable Organizations
 PO Box 8722
 Harrisburg, Pennsylvania 17105-8722
BUSINESS ORDER REQUEST FORM

B0441-2921 11/15/2022 1:06 PM Received by Pennsylvania Department of State

Entity Details	
Entity Name	MasTec Professional Services, LLC
Entity No.	0006367905
File Date	02/23/2016
Entity Type	Domestic Limited Liability Company
Entity Status	Active
Request Type	
Request Type	Copy Request
Copies Request	
Please select one	Certified Copy Request
Certificate of Amendment #0003561202	
Filing Date	
11/14/2022 9:15 AM	
Page Count	
1	