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| (Re | questor's Name) | | | |
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| (Address) | | | | |
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| (Cit | ty/State/Zip/Phone | · #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nam | ne) | | |
| (Do | ocument Number) | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



100371808731

MECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : 12000000195 |
|---|
| REFERENCE : 066601 7157369 |
| AUTHORIZATION: Joseph Reman |
| COST LIMIT : \$ 25.00 |
| ORDER DATE : October 1, 2021 |
| ORDER TIME : 8:50 AM |
| ORDER NO. : 066601-005 |
| CUSTOMER NO: 7157369 |
| |
| FOREIGN FILINGS |
| NAME: QUANTA ELECTRIC POWER CONSTRUCTION, LLC |
| CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY |
| XXXX AMENDMENT |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

COVER LETTER

TO:

Registration Section

Division of Corporations Quanta Electric Power Construction, LLC SUBJECT: Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Claudia G. Santos Name of Person Quanta Electric Power Construction, LLC Firm/Company 2800 Post Oak Blvd., Ste 2600 Address Houston, Texas 77056 City/State and Zip Code csantos@quantaservices.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudia G. Santos Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □\$25 Fiting Fee □ \$30 Filing Fee & ☐ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy CR2E055 (9/15)

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)

| 1. Name of limited liability Company as it appears | · | | | |
|--|---|---|----------------------------|--|
| State: Quanta Electric Power Construction, Ll | _C | | | |
| 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) | | SEGRETAL | 202 OCT - 4 | |
| 2. The Florida document number of this limited lia | - | <u> 10 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 </u> | 9:19 | |
| 3. Jurisdiction of its organization: Delaware | | | | |
| 4. Date authorized to do business in Florida: 10/2 | 2/2018 | | | |
| SECTION II (5-9 complete only the applicable of | | | | |
| 5. New name of the limited liability company: Qu | | ," or "L | ") | |
| (If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C | naging members adopting the alternate name. The | a and at e alterna | tach a ate name | |
| 6. If amending the registered agent and/or registere registered agent and/or the new registered office ac | ed officer address on our records, enter the name idress here: | of the n | <u>ew</u> | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | | | . <u> </u> | |
| | Enter Florida Street Address | | | |
| | , Florida | ip Code | | |
| New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ager the provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of the | gistered Agent: at and agree to act in this capacity. I further agre and complete performance of my duties, and I ar ered agent as provided for in Chapter 605, F.S. (in the registered office address, I hereby confirm | e to cor n famili Or, if thi | mply with ar with is | |

| le/ Capacity | <u>Name</u> | Address Typ | e of Action |
|-------------------|---------------------------------------|--|-------------|
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| aforementioned am | he law of which this entity is organi | he official having custody of records in the | □Remove |

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "QUANTA ELECTRIC POWER

CONSTRUCTION, LLC", FILED A CERTIFICATE OF MERGER, CHANGING ITS

NAME TO "QUANTA INFRASTRUCTURE SOLUTIONS GROUP, LLC" ON THE

TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2021, AT 4:56 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE FIRST DAY OF OCTOBER,

A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 204312084

Date: 10-04-21