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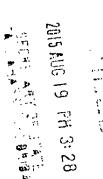
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AUG 10 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: 7. Johnson Mechanical INC. DOCUMENT NUMBER: POI 0000 748
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas Johnson Name of Contact Person 7. Johnson Machanical Inc Firm/ Company 402 A HAWK St Address Address City/ State and Zip Code Tommy 1820 CFL. R.P. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Thomas Johnson at (321) 632-0963 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations

Tallahassec, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

The same in

Articles of Amendment

to

Articles of Incorporation

2015 AUG 19 PH 3: 28

Name of Corporation as currently filed with the Florida Dept. of State) 00000C (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: "company," or "incorporated" or the abbreviation name must be distinguishable and contain the word "corporation. maine mass of distinguishame and contain the word—corporation,—company,—or "incorporated" or the abbreviation "Corp.," "Inc.," or "Ro.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.4." 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 (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

Signature of Kew Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President: T= Treasurer; S= Secretary; D= Director: TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	. / .	<u>Address</u>	
1) Change			N/A	_	
Add					
Remove			, ,		
2) Change			N/A		
Add					
Remove			61/1		
3) Change			NIN		
Add					
Remove			1		
4) Change			N/A	_	
Add					
Remove			/ .		
5) Change			N/A		
Add			l		
Remove			,		
6) Change			W/A	_	
Add			į.		
Remove					

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self:
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The date of each amendment(s) adoption:	5	5-5-15	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	5	-15-15	
	(no more than 90 day	s after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St		statutory filing requirements	s, this date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)		
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app		ber of votes cast for the ame	ndment(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting ga			
"The number of votes cast for the amend	ment(s) was/were suf	ficient for approval	
by(votin			
(votin	g group)		
☐ The amendment(s) was/were adopted by the boaction was not required.	oard of directors with	out shareholder action and sh	archolder
The amendment(s) was/were adopted by the in action was not required.	corporators without s	hareholder action and shareh	older
Dated 5-5-1	5	_	
Signature			
(By a director, preside		if directors or officers have r	
		ds of a receiver, trustee, or o	ther court
appointed fiduciary b	by that fiductary)		
\overline{lh}	omos A.	Ghusan	
(T	yped or printed name		
•	PROS		
		rson signing)	