## P02000099711

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
, 		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
(20	ountent Humber,	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400079256684

03/20/06--01012--010 \*\*35.00

O6 SEP 20 AM IO: 58 O6 SEP 20 AM IO: 52
SEURCIARY OF STATE OF THE SEURCIARY OF STATE OF SELECTION OF SECURIOR OF S

Amend & N. C. C. Couttierre SEP 2 0 2006

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Lightwave	Services Inc.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: P02000099711		
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Jason Maddox		
(Name o	of Contact Person)	
Lightwave Services Inc.		
(Fir	m/ Company)	
PO Box 737	(Address)	<del></del> - <u>.</u> .
Greenwood, FL 32443	(Add Coo)	
(City/ S	tate and Zip Code)	THE COLUMN TO STATE OF
For further information concerning this matter,	please call:	
Jason Maddox (Name of Contact Person)	at ( 850 ) 209-2709  (Area Code & Daytime Telephone Number)	
,	(Area Code & Daytime	relephone (vanioe)
Enclosed is a check for the following amount:		
☑ \$35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir	cle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Lightwave Services inc.
(Name of corporation as currently filed with the Florida Dept. of State)
P02000099711
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Procom Cabling Inc.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Add the following officer to the Corporation:
Jason L. Maddox, President
Amend Article II, Change the Mailing address of the corporation to
PO Box 737
Greenwood, FL 32443
<u> </u>
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

(continued)

The date of each amendment(s) adoption: September 19, 2006
Effective date if applicable: September 18, 2006  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Mary K. Maddox
(Typed or printed name of person signing)
Director
(Title of person signing)

FILING FEE: \$35