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SECRETARY OF STATE TVISION OF COMPTRATION



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: B. A. Han	nilton Electrical Service, Inc.
DOCUMENT NUMBER: P0400000	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this t	natter to the following:
Bruce A. Hamilt	on
	Name of Contact Person
B. A. Hamilton l	Electrical Service, Inc.
	Firm/ Company
4406 Plompton	Drive
	Address
Melbourne, Flor	rida 32935
***************************************	City/ State and Zip Code
bahamiltonelectrica	Mayahoo com
	used for future annual report notification)
E-man address. (10 00	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, pl	ease call:
Bruce A. Hamilton	at (321)_863-9473
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee	
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 Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

B. A. Hamilton Electrical	Service, Inc.				
· · · · · · · · · · · · · · · · · · ·	s currently filed with the Flo	rida Dept. of State)		_	
P04000000406					
(Docume	nt Number of Corporation (if	known)		_	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the followi	ng ame	endment(s)
A. If amending name, enter the new n	ame of the corporation:				
N/A				The	пен:
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corpora A."		— abbrevi	iation
B. Enter new principal office address,		N/A			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)				
C. Enter new mailing address, if appl		N/A			
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)			_	
				_	
D. 16	Manager Language Company		C.I	_	
D. If amending the registered agent an new registered agent and/or the ner		ss in Florida, enter the nam	e of the		٠,
Name of New Registered Agent	N/A			-	330
<u>Name of New Registered Agent</u>		,		®	23
	(Florida stree	41.1		~	
	trioriaa siree	i adaress)		ယ်	545 143 143 143 143 143 143 143 143 143 143
New Registered Office Address:	(City)	, Florida_	(Zip Code)	- *	
	(CIIV)		(Zip Code)	بې	
				25	골품
New Registered Agent's Signature, if c					han- -
I hereby accept the appointment as regist	tered agent. I am familiar wi	th and accept the obligations	of the position.		
Si	gnature of New Registered Ag	ent, 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:		y	
X Change	<u>PT</u>	John Doe	•
X Remove	Y	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	James Lee Jennings	231 Brantley Street NE
✓ Add			Palm Bay, Florida 32909
Remove			
2) Change			
Add			****
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			glassis a surface of surface and surface of
Remove			

(Att	mending or adding additional Articles, enter change(s) here; ach additional sheets, if necessary). (Be specific)
N/A	
7. <u>If a</u> <u>pr</u> N/A	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: October 9, 2013	, if other than th
date this document was signed.	
Effective date if applicable: October 9, 2013	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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.	
Dated October 9, 2013	
Signature B	
(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)	
Bruce A. Hamilton	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_