## P050000045981

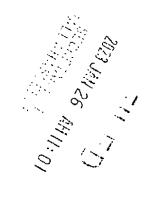
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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: JSH GROUP CORP DOCUMENT NUMBER: P05000045981 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAVIER DE VARONA Name of Contact Person DE VARONA CPA PA Firm/ Company 2525 PONCE DE LEON BLVD STE 300 Address CORAL GABLES, FL 33134 City/ State and Zip Code JDEVARONA@DEVARONACPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee



## Articles of Amendment to Articles of Incorporation of

JSH GROUP CORP	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P05000045981	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
PRECISION MEP SUPPLY INC	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
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 ad- new registered agent and/or the new registered office addre	Idress in Florida, enter the name of the
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familian	ir with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT John Doe	
X Remove	Y Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change		- A REPORT OF THE PROPERTY OF
Ađd		
Remove		
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Ađd		
Remove		
5) Change		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Articl (Attach additional sheets, if necessary).	(Be specific)	_		
			<del></del>	
			· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an excha- provisions for implementing the amen-	inge, reclassification, o	or cancellation of issue	ed shares,	
(if not applicable, indicate N/A)	dinent it not contained	i in the amendment it	sen.	
<del>-</del>				

JANUARY 15, 2023	if other than the
The date of each amendment(s) adoption:date this document was signed.	n oner man me
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shaction was not required.	areholder
☐ 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)	
DatedSignature	
(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 liquiciary by that fiduciary)	
JOHN HERNANDEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	