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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ME OF CORPORATION: ALL NATION ELECTRICAL, INC				;	
DOCUMENT NUMBER:	P0600009566					
The enclosed Articles of Ar	nendment and fee are su	ıbmitted for filing	} -			
Please return all correspond	ence concerning this ma	atter to the following	ing:			
		MICHAEL K.	JESRAM			
	Name of Contact Person					
	ALL NATION ELECTRICAL, INC					
	Firm/ Company					
	7701 PINEAPPLE DRIVE					
	Address					
	ORLANDO, FLORIDA 32835					
		City/ State and	d Zip Code	:		
		MRPRIDE@A	IT.NET			
	E-mail address: (to be u	sed for future ann	ual report	notificati	on)	
For further information con	cerning this matter, plea	se call:	407	_)	468-9367	
Name of Co.	ntact Person		Area Cod	le & Day	time Telephone Number	
Enclosed is a check for the	following amount made	payable to the Flo	orida Depa	rtment of	State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filin Certified Cop (Additional control enclosed)	ру	Certi Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy closed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amenda Division The Ce 2415 N		orations Fallahassee e Street, Suite 810	

Articles of Amendment to Articles of Incorporation of

ALL NATION ELECTRICAL, INC.

	ly filed with the Florida Dept. of State)	
P06000	0009566	
(Document Number o	of Corporation (if known)	
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(
If amending name, enter the new name of the corporation:		
		_The new
me must be distinguishable and contain the word "corporation," "onc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contai	on "Corp.," n the word
Enter new principal office address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		
		623
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
		<u></u>
If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		10: 19
new registered agent and/or the new registered office address	<u> </u>	9
Name of New Registered Agent		-
(Florida str	reet address)	-
New Registered Office Address:	. Florida	
	(City) (Zip C	Coda)

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)

Example:

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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	V	BLADIMIRA RAMOS-ZUNIGA	330 NE 26TH AVENUE, APT 202
X Add	_	-	BOYNTON BEACH, FL 33435
Remove			
2) Change	VP	ALVARO O. ALVAREZ	605 PALMETTO DRIVE
Add			MASCOTTE, FLORIDA 34753
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	or adding additiona onal sheets, if necessor	ary). (Be specific	:)			
					 	
						
						
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provisions for	ment provides for an or implementing the pplicable, indicate NA	amendment if no	sification, or cand of contained in th	cellation of issue e amendment its	d shares, self:	
<u> </u>				<u> </u>		
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		<u> </u>				

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	AUGUST 06, 2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	AUGUST 06, 2020	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without sh	nareholder action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for th sufficient for approval.	e amendment(s)
	approved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	,,,	
,	(voting group)	
	AUGUST 06, 2020	
Dated		
Signature	merran	
selec	director, president or other officer – if directors or officers hed, by an incorporator – if in the hands of a receiver, trustee inted fiduciary by that fiduciary)	
	MICHAEL K. JESRAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	