## P06000088574

| •                                       |
|---|
| (Requestor's Name)                      |
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

shared by the contract of the

Amend

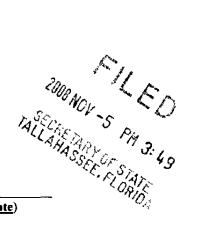
11-17-08

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORE         | PORATION: Integrity Ele                   | ectrical Services Inc.   | a   |
|----------------------|---|--|---|
| DOCUMENT NU          | MBER: <u>P0600008857</u> 4                |  | 1   |
| The enclosed Artic   | eles of Amendment and fee a               | re submitted for filing.   |   |
| Please return all co | prespondence concerning thi               | s matter to the following:   |   |
|                      |   | stopher Killmeyer<br>of Contact Person)  |   |
|                      | (Name v                                   | or contact reisony   |   |
|                      | AP  | I Processing   |   |
|                      | (Fir                                      | rm/ Company)   |   |
|                      |   | Ocean Drive, Suite A   |   |
|                      |   | (Address)  |   |
|                      |   | lerdale, FL 33308  |   |
|                      | (City/S                                   | tate and Zip Code)   |   |
| For further inform   | ation concerning this matter,             | please call:   |   |
| Christopher Killn    |   | at ( <u>954</u> ) <u>567-00</u>  |   |
| (Nam                 | e of Contact Person)                      | (Area Code & Daytim  | e Telephone Number)   |
| Enclosed is a chec   | k for the following amount n              | nade payable to the Florida De   | epartment of State:   |
| ☑\$35 Filing Fee     | S43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  | \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
| P.O. Box 6           | nt Section<br>f Corporations              | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 |   |

## Articles of Amendment to Articles of Incorporation of



| Integrity E   | Electrical Service                 | es inc.                          | nte)                       |
|---|------------------------------------|----------------------------------|----------------------------|
| (Name of Corporation as cu  |                                    |                                  | ate)                       |
| q   | 06000088574                        |                                  |                            |
|   | umber of Corporat                  | ion (if known)                   | <del></del>                |
| ursuant to the provisions of section 607.1 ellowing amendment(s) to its Articles of Inc.  | 006, Florida Statu<br>corporation: | tes, this <i>Florida Profi</i> t | Corporation adopts the     |
| . If amending name, enter the new name  | e of the corporatio                | <u>n:</u>                        |                            |
| I/A   |                                    |                                  |                            |
| he new name must be distinguishable incorporated" or the abbreviation "Corp. Co". A professional corporation no ssociation," or the abbreviation "P.A." | .," "Inc.," or Co.                 | ," or the designation            | "Corp," "Inc," or          |
| . Enter new principal office address, if a Principal office address MUST BE A STR.  | pplicable:<br>EET ADDRESS )        | N/A                              |                            |
| . Enter new mailing address, if applical  | ble:                               |                                  |                            |
| (Mailing address MAY BE A POST OF   |                                    | N/A                              |                            |
|   |                                    |                                  |                            |
|   |                                    |                                  |                            |
| <ol> <li>If amending the registered agent and/o<br/>new registered agent and/or the new r</li> </ol>  |                                    |                                  | nter the name of the       |
| Name of New Registered Agent:   | N/A                                |                                  |                            |
|   |                                    |                                  | ****                       |
| New Registered Office Address:  | (Flor                              | ida street address)              |                            |
|   |                                    |                                  | , Florida                  |
|   |                                    | (City)                           | (Zip Code)                 |
| lew Registered Agent's Signature, if chan<br>hereby accept the appointment as registed<br>osition.  |                                    |                                  | ept the obligations of the |
| ~   | Signature of Nav                   | v Registered Agent, if cl        | anaina                     |
|   | aignaiare of New                   | , registered Agerii, ij tr       | ining ing                  |

## 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)

| <u>Title</u>   | Name  | Address   | Type of Action                          |  |  |
|--|---|---|---|--|--|
| <u>VP</u>  | Victor Omar Tianga  | 16880 Gator Rd. #108<br>Ft. Myers, FL 33912                             | Add Remove                              |  |  |
| <del></del>  |   |   | Add Remove                              |  |  |
|  |   |   |   |  |  |
| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  N/A |   |   |   |  |  |
|  |   |   |   |  |  |
| <u>provisions</u>  | idment provides for an exchange, recla<br>for implementing the amendment if ne<br>applicable, indicate N/A) | ssification, or cancellation of iss<br>of contained in the amendment in | ued shares,<br>tself:                   |  |  |
| N/A  |   |   |   |  |  |
|  |   |   | *************************************** |  |  |
|  |   |   |   |  |  |
|  |   |   |   |  |  |
|  |   | ······································                                  |   |  |  |
| <del>(** (** (*****************************</del>  |   |   |   |  |  |

| The date of each amendment(s  | ) adoption: <u>10/21/2008</u>   |  |  |  |
|---|---|--|--|--|
| Effective date if applicable:   |   |  |  |  |
| Effective date if applicable:  (no more than 90 days after amendment file date) |   |  |  |  |
| Adoption of Amendment(s)  | (CHECK ONE)   |  |  |  |
| The amendment(s) was/were by the shareholders was/were                          | adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.   |  |  |  |
| The amendment(s) was/were must be separately provided                           | approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):   |  |  |  |
| "The number of votes ca   | ast for the amendment(s) was/were sufficient for approval   |  |  |  |
| by  | ,33   |  |  |  |
| (1  | voting group)   |  |  |  |
| The amendment(s) was/were action was not required.                              | adopted by the board of directors without shareholder action and shareholder  |  |  |  |
| The amendment(s) was/were action was not required.                              | adopted by the incorporators without shareholder action and shareholder   |  |  |  |
| Dated_  | 10 22 68<br>  |  |  |  |
| Signature <u>/</u>  | How had   |  |  |  |
| (By a select  | director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |  |  |  |
|   | Benjamin T. Mading (Typed or printed name of person signing)  |  |  |  |
|   | President (Title of person signing)   |  |  |  |