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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INTEGRITY ELECTRICAL SERVICES INC.				
DOCUMENT NUMBER: P06000088574				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:				
Michael A Scott				
	Name of Contact Person	n		
The Dorcey Law Firm, PLC				
	Firm/ Company			
10181 Six Mile Cypress Pa	arkway, Suite C			
	Address			
Fort Myers, FL 33966				
	City/ State and Zip Cod	e		
mike@dorceylaw.com				
E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, pleas	se call:			
Michael A Scott	239	418-0169		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
\$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	Amend Divisio The Co 2415 ?	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

u	NTF	GRITY	FLEC:	TRICAL	SERV	ICES IN	^
11				IRILAL	3 F R V	11.17.35 110	

(Manue of	Corporation as currently	filed with the Florida Dept. of State)	
06000088574			
	(Document Number of	Corporation (if known)	
rsuant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this F	Clorida Profit Corporation adopts the follow	ving amendment(s) t
If amending name, enter the new na	me of the corporation:		
			The new
me must be distinguishable and contain nc.," or Co.," or the designation "Cohartered," "professional association."	orp," "Inc," or "Co". A	ompany," or "incorporated" or the abbrevio professional corporation name must con	ation "Corp"
Enter new principal office address, i rincipal office address <u>MUST BE A ST</u>			
Enter new mailing address, if applic	cable:		
(Mailing address MAY BE A POST O	PFFICE BOX)		32
If amending the registered agent and new registered agent and/or the new	d/or registered office addre	ess in Florida, enter the name of the	E:
	DLF Registered Agent Se		
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	
-	10181 Six Mile Cypress F		
	(Florida str e i	·	
	Fort Myers	_, , 3396	6
New Registered Office Address:		, Florida	<u> </u>

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	<u>PT</u>	<u>Iohn Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			•
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
Management of the second	
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
	ult of an exchange of shares by and between Victor O. Tianga &
elly G. Tianga. At the time of the exchi	ange, Victor O. Tianga, was 100% owner of all issued and outstanding
hares of the Company, and thereby As	signed Separate from Certificate 51% of all issued and outstanding
hares to his spouse Nelly G. Tianga. T	he transfer and the filing of this Amendment was approved
nanimously by the shareholders.	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder act	ion and shareholder
■ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment officient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	6/17/20	
Signature	Jelly trange	
selecte	rector, president or other officer - if directors or officers have not been l, by an incorporator - if in the hands of a receiver, trustee, or other cou ed fiduciary by that fiduciary)	
	Nelly G. Tianga	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	

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