P06000088574

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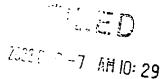
2021 F. D. - 7 AN 10: 25

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: INTEGRITY ELE	CTRICAL SERVICES INC	<u> </u>
DOCUMENT NUM	BER: P06000088574		·
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Nelly Tianga		
		Name of Contact Person	1
	Integrity Electrical Services		
		Firm/ Company	
	17401 Alico Center Road		
		Address	
	Fort Myers, FL 33967		
		City/ State and Zip Cod-	2
	nelly@iesmail.net		
		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	344-7925
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fi	or the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Ameno Divisio The C 2415 ì	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



INTEGRITY ELECTRICAL SERVICE	S INC.	Ĺ	一月月10:29
(Name	of Corporation as currently	filed with the Florida Dept	STATE
P06000088574			S.FL
· · · · · · · · · · · · · · · · · · ·	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	1006, Florida Statutes, this a	Torida Profit Corporation ac	lopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	Corp." "Inc." or "Co". A	ompany," or "incorporated" professional corporation n	or the abbreviation "Corp" ame must contain the word
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			
			·
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
(Stutting uturess SIAT BE A FOST	OFFICE BOX)		
). If amending the registered agent ar	rd/or registered office add	ass in Florida, anter the nat	me of the
new registered agent and/or the ne			ne or the
Name of New Registered Agent	Nelly Tianga		
Name of New Registered Agent	18233 Hawthorne Road	···	
	(Florida str	et address)	
New Registered Office Address:	Fort Myers		Florida 33912
New Registered Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if of hereby accept the appointment as regis			ns of the position
, , , , , , , , , , , , , , , , , , , ,		in the accept the obligation	s of the position.
Docusigned	oy.		
REGARGEDO	anga Bisab		
	Signature of New R	egistered 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)

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>	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u> </u>	
hange, reclassification, or cancellation of issued shares,	
endment if not contained in the amendment itself:	
<u> </u>	
<u></u>	
-	
	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

DocuSign Envelope ID: BD278641-8484-4BF7-A766-F1BD2CEDA568

The date of each amendment(s) adoption:date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	will not 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 action was not required.	and shareholder
☐ 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	n <u>2</u> 8
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
10/19/2022 Dated	7 AN 10: 29
Signature Ally Times	m
(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)	
Nelly G Tianga	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	_