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Office Use Only





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: S AND	S CERTIFIED	INSTALLATION	INC
DOCUMENT NUMBE	R:P0600	0 109 228		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	Steven			
	2 and C	Name of Contact Person  CERTIFIED INS	TOWATION INC	
		Firm/ Company		
	2245	LAS VEGAS	Tel.	
	NAUARR	Address FF1. 325	666	
	·	City/ State and Zip Code		
		rae <u>CHotma.'</u> ded for future annual report n		
For further information c	concerning this matter, pleas	e call:		
STEVE	N BALLANS	at ( 850	259-7561	
Name of	Contact Person -		e & Daytime Telephone Number	
Enclosed is a check for t	he following amount made p	payable to the Florida Depar	iment of State:	. •
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mailin</u>	g Address	Street A	ddress	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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## Articles of Amendment

16 DEC 12 AH 10: 41

(Name of Corporation as currently filed with the Florida Dept. of State)  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment
ursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendmen
s Artificies of incorporation.
. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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)
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered of fice address:
Name of New Registered Agent
(I <sup>t</sup> lorida street address)
New Registered Office Address: Florida (City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:  thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

## 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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	S GIORDAN DODGE	304 EVERGEEN DR
<del>✓</del> ∧dd		MARY ESTER F1. 5256
Remove		
2) Change	<del></del>	
Add		
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5) Change	\ \	·
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Remove		
Kellove	3	
6) Change		
Remove		

y necessary	Articles, enter char y). (Be specific)			
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f an amendment provides for an e provisions for implementing the a (if not applicable, indicate N/A	mendment if not c	cation, or cancella ontained in the an	tion of issued sha nendment itself:	res,
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f an amendment provides for an eprovisions for implementing the a (if not applicable, indicate N/A	mendment if not c	ication, or cancells contained in the an	ntion of issued sha nendment itself:	res,

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8 - Dec - 2016	
Signature  (B) 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)	
STEVEN BALLANS	
(Typed or printed name of person signing)	
PRESIDENT (Title of purson circuits)	
(Title of person signing)	