

207000133009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

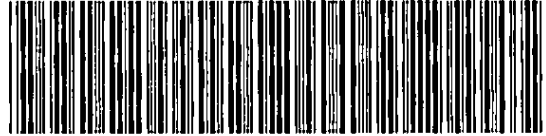
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/04/18--01013--018 **35.00

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2018 JUN 18 P 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 19 2018

T. LEMUEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL SERVICE ELECTRIC OF FT MYERS, INC

DOCUMENT NUMBER: P07000133669

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VINCENT SANZERI

Name of Contact Person

ALL SERVICE ELECTRIC OF FT MYERS, INC

Firm/ Company

17460 EAST STREET

Address

FT MYERS FL 33917

City/ State and Zip Code

VINCENT@ALLSERVICEELECTRICFM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VINCENT SANZERI

at (239) 603-6967

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2018

VINCENT SANZERI
17460 EAST ST
FT MYERS, FL 33917

SUBJECT: ALL SERVICE ELECTRIC OF FT. MYERS, INC.
Ref. Number: P07000133669

We have received your document for ALL SERVICE ELECTRIC OF FT. MYERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box for the adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 918A00011927

RECEIVED
18 JUN 15 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FL 32310

Articles of Amendment
to
Articles of Incorporation
of

ALL SERVICE ELECTRIC OF FT MYERS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P07000133669

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. 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**)

D. 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 office address:

Name of New Registered Agent

VINCENT SANZERI

17460 EAST STREET

(Florida street address)

New Registered Office Address:

FT MYERS

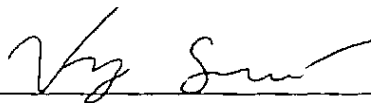
(City)

, Florida 33917

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>JACK SANZERI</u>	<u>1684 TARGET CT</u>
<input type="checkbox"/> Add			<u>FT MYERS FL 33905</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>BARBARA SANZERI</u>	<u>17460 EAST STREET</u>
<input checked="" type="checkbox"/> Add			<u>FTMYERS FL 33917</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>COO</u>	<u>ATHLENE A PHILLIPS</u>	<u>17460 EAST STREET</u>
<input type="checkbox"/> Add			<u>FT MYERS FL 33917</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>V.P.</u>	<u>James Wright</u>	<u>17460 East Street</u>
<input checked="" type="checkbox"/> Add			<u>Ft myers fl 33917</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 VINCENT SANZERI, BARBARA SANZERI

(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 5/31/18 _____

Signature _____

(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)

VINCENT SANZERI

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)