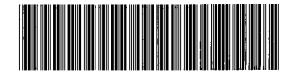
(Re	questor's Name)	
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7/29/4

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: ADVANCE	D POWER ELECTRICAL CONTRACTOR	
DOCUMENT NU	UMBER:P09000027115		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning the	is matter to the following:	
		LUIS GARCELL	
	N	Name of Contact Person	
	ADVANCED POWER	ELECTRICAL CONTRACTORS, INC. Firm/ Company	
	·	P.O BOX 990341	
		Address	
		APLES, FL. 34116 City/ State and Zip Code	
	LUIS@ADVA	ANCEDELECTRIC.NET ad for future annual report notification)	
For further inform	ation concerning this matter,		
	UIS GARCELL of Contact Person	at (239) 253-1821 Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Department of State:	
₹35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)	
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation

FILEU

ADVANCED POWER ELECTRICAL CONTRACTORS PM 3: 18

(Name of Corporation as curr	000027115	SECRETARY UP SECRETARY OF TALLAHASSEE. FLORIDA
	mber of Corporation (if kn	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this I	Florida Profit Corporation adopts the following
A. If amending name, enter the new name o	f the corporation:	
		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "In	ac," or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	: CE BOX)	
D. If amending the registered agent and/or a new registered agent and/or the new registered.		in Florida, enter the name of the
Name of New Registered Agent:		had alterna
New Registered Office Address:	(Florida street	address)
	8#84c=c=================================	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as		and accept the obligations of the position.
<u></u>	Signature of New Registere	ed Agent, if changing

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>	<u>Name</u>	Address	Type of Action
ST ALAIN COND	ALAIN CONDOMINA	P.O BOX 990341 NAPLES, FLORIDA	☐ Add ☑ Remove
		34116	
ST YUSNIEL MART	YUSNIEL MARTINEZ	P.O BOX 990341 NAPLES, FLORIDA	
		34116	
			
(attach	additional sheets, if necessary). (Be sp	pecific)	
<u>provi</u>	amendment provides for an exchange, sions for implementing the amendment (not applicable, indicate N/A)	reclassification, or cancellation of i	ssued shares, t itself:
ALL	10% STCK OWNERSHIP IS TO B	E TRANSFERED FROM ALAII	N CONDOMINA
TO YUS	NIEL MARTINEX EFFECTIVE 7/2	25/2011.	

The date of each amendment	(s) adoption: <u>07</u>	/25/2011
Effective date <u>if applicable</u> :	07/25/2011	(date of adoption is required)
Enective date <u>if applicable</u> .		0 days after amendment file date)
Adoption of Amendment(s)	(СН	ECK ONE)
✓ The amendment(s) was/we by the shareholders was/we		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	dment(s) was/were sufficient for approval
by	· · · · · · · · · · · · · · · · · · ·	"
•	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the	incorporators without shareholder action and shareholder
Dated 07/2	25/2011	$\overline{\Omega}$ Ω
tele		ent of other officer – if directors or officers have not been corator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		S GARCELL ped or printed name of person signing)
	(Title of	RESIDENT