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Certified Copies	Certificates	s of Status
Special instructions to	Filing Officer:	
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TALL AHASSEE, FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: A &H Fire Systems Inc.
DOCUMENT NUMBER: P 100000 4331
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph B. Bonanno Name of Contact Person
A&H FIFE Systems, Inc.
P.O. Box 82981 Address
Tampa, FL 33682 City/ State and Zip Code
jbonanno @ ahelectrical. net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Toseph B. Bonanno at (813) 972-3880 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 Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

Articles of Incorporation of
Articles of Incorporation of
At H Fire Systems, Inc. Secretary PM 2:20
(Name of Corporation as currently filed with the Florida Dept. of State) [ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
P1000004331
(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(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
M/AThe 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 <u>MUST BE A STREET ADDRESS</u>)
NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
N/A
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: Was Joseph B. Bongno
New Registered Office Address: (Florida street address)
, Florida

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.

(City)

(Zip Code)

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
<u>esident</u>	Joseph B. Bonanno	P.O. Box 82981 Tampa, FL 33682	Add Remove
			_
			Add Remove
	WA		
provisio	nendment provides for an exchange, recons for implementing the amendment if of applicable, indicate N/A)		
· · · · · · · · · · · · · · · · · · ·	WA		

The date of each amendment(s)	adoption: 1/26/2011
Effective date <u>if applicable</u> :	1 26 (date of adoption is required)
0	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes can	st for the amendment(s) was/were sufficient for approval
by	97
(v	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 1/2	6/20x1
Signature	////Wak///w
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Charles A. Himes (Typed or printed name of person signing)
•	(Typed or printed name of person signing)
-	Vice President
	(Title of person signing)