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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION	: Deregulated Energy of America, Inc.	· :		
DOCUMENT NUMBER:				
The enclosed Articles of Amen	dment and fee are submitted for filing.			
Please return all correspondence	e concerning this matter to the following:			
	Daniel Hitchcock	_		
	Name of Contact Person			
	Deregulated Energy of America, Inc.	-		
	Firm/ Company			
	15261 Telcom Drive Address			
	Brooksville FL 34608			
	City/ State and Zip Code	-		
E-mail	address: (to be used for future annual report notification)			
For further information concern	ning this matter, please call:			
Daniel Hitche	" ( 10 · )			
	owing amount made payable to the Florida Department of Stat			
	(Additional copy is enclosed) Certified (	e of Status		
Mailing Address  Amendment Section  Division of Corporation	Street Address Amendment Section Division of Corporations			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

	4_	·
	to Antialas of Incomposation	
F	Articles of Incorporation of	OC. Dept. of State) TALL MAY 27 PM 3:
		22/1/1924
	nergy of America, In	ic. "7 27 PM 2
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)
P11	000006971	THE FELLENIALE
	nber of Corporation (if know	vn) LURIDA
rsuant to the provisions of section 607.1006 endment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the follow
If amending name, enter the new name of	f the corporation:	
		The new
breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "progenies must contain the word "chartered," "progenies must contain the word "chartered," "progenies must new principal office address, if applicable address MUST BE A STREE (Mailing address MAY BE A POST OFFICE (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or the new	fessional association," or the licable: TADDRESS  CEBOX	the abbreviation "P.A."
Name of New Registered Agent:		
New Registered Office Address:	(Florida street aa	ddress)
	(	
	(0)	, Florida (Zip Code)
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing thereby accept the appointment as registered a		

## 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
STD	David Hitchcock	15261 Telcom Drive Brooksville FL 34608	☐ Add ☑ Remove
<u>VP</u>	Matthew P. Ionno	15261 Telcom Drive Brooksville FL 34608	☐ Add ☐ Remove
<u>VP</u>	David Hubbard II	15261 Telcom Drive Brooskville FL 34608	
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
provisi	nendment provides for an exchang ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendment	(s) adoption: <u>05/01/11</u>
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemen d 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	,,,
<u> </u>	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Daniel Hitchcock
	(Typed or printed name of person signing)
	President/Secretary/Treasurer/Director
	(Title of person signing)