P120000554444

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

Amend

OCT 1 8 2012

T. LEWIS

COVER LETTER

Division of Corporations NAME OF CORPORATION: Advanced Lighting Systems Inc DOCUMENT NUMBER: P12000055444 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Maria Palacios Name of Contact Person Advanced Lighting Systems Inc Firm/ Company 12330 NW 55 ST Address Coral Springs, FL 33076 City/ State and Zip Code mggmlala99@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maria Palacios at (954) 778-6115

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment Articles of Incorporation

FILED
ATTOCT 17
TALLAHASSEE, FLORIDA

Advanced Lighting Systems, Inc

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

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lment(s) to

(Document Number of Corporation ((if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following	ing amendme
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must	
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 new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida st	street address)	
New Registered Office Address:	, Florida	_
(City)	ty) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	
I hereby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position	,
Signature of New Registered	d 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)

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:	.,	,	
X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Oscar A. Gutierrez	12330 NW 55 ST
X Add			Coral Springs, FL
Remove			33076
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ittach <i>additio</i>	or adding addition on all sheets, if nece	ssary). (Be sp	ecific)			
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<u>provisions fo</u>	nent provides for or implementing to oplicable, indicate	the amendment	classification, o	or cancellation of I in the amendmo	issued shares, ent itself:	

, . 53

The date of each amendment(s) a	doption: 1U/12/12
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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 adaction was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 10/11/	112 HHJ
(By a selection	director, praylecut 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 inted fiduciary by that fiduciary)
	Maria Palacios
	(Typed or printed name of person signing)
	CFO
	(Title of person signing)