## P15000041659

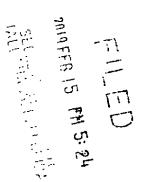
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Advanced Electric of Florida Inc
DOCUMENT NUMBER: P1500041659
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bryan Porter  Name of Contact Person  Advanced Electric of Florida Inc  Firm/ Company  179 Shawnee Trl  Address  Ormad Beach FL 32174  City/ State and Zip Code  bp179 @ Yahoo. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bryan Porter at 384, 6828243  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  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation

Hovarced Electric of tor	
(Name of Corporation as currently filed	with the Florida Dept. of State)
P15000041659	
(Document Number of Corp.	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	a Profit Corporation adopts the following amendment(s) to
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 "Co", word "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated or the abbreviation A professional corporation name must contain the
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)	
	7,
	22
<del></del>	
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 Doyan Tor	10
179 Shaw	ice.Tr
New Registered Office Address: Ormand Be	ach Florida 32174
•	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a	nd accept the obligations of the position

Signature of New Registered 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	<u>PT</u>	John Doe		
$\underline{X}$ Remove	$\underline{\mathbf{V}}$	Mike Jones		
$\underline{X}$ Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change			 	
Add				
Remove				
2) Change			 	
Add				
Remove				
3 ) Change			 	
Add				
Remove				
4) Change			 	
Add				
Remove				
<i>5)</i> Change			 	
Add				
Remove				
6) Change			 	
Add				
Remove				

	Articles, enter change(s) here: y). (Be specific)	
nlA		
	<u> </u>	
- 40		
If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the a	mendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	)	
NIX		

The date of each amendment(s) adoption: ONDONDONG, 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) ( <u>CHECK ONE</u> )
☐ 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
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.
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)  (Typed or printed name of person signing)
(Title of person signing)