PISO000 48897

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SEP 1 7 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PEDRO ELECTRIC	CAL WORK INC			
DOCUMENT NUMBER: P15000048897				
The enclosed Articles of Amendment and fee are sub	bmitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
Bertha Re	Name of Contact Person			
	Name of Contact Person			
	Firm/ Company			
3801 NE 16TH AVE				
	Address			
POMPANO BEACH, FL 330	064			
	City/ State and Zip Code			
	,			
E-mail address: (to be use	ed for future annual report notification) e call:			
BERTHA RENTERIA	297-7152			
Name of Contact Person	at (954) 297-7152 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p				
\$35 Filing Fee \$\mathbb{\mathbb{K}}\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PEDRO ELECTRICAL WORK INC

(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P15000048897		
(Docu	ment Number of Corporation (if known)	28
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the f	ollowing amendment(s)
A. If amending name, enter the new name of the c	corporation:	
	ord "corporation," "company," or "incorporated" or p," "Inc," or "Co". A professional corporation name abbreviation "P.A."	
B. Enter new principal office address, if applicable		······································
(Principal office address <u>MUST BE A STREET AD</u>	<u></u>	····
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of the	
new registered agent and/or the new registered	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil levels is the level of the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the po	sition.
Sign	nature 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)

Example:

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.

X Change	<u>PT</u> <u>Joh</u>	<u>in Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	PEDRO M F SAUCEDA	3801 NE 16TH AVE
Add			POMPANO BEACH, FL
X Remove			33064
2) X Change	P	BERTHA RENTERIA	3801 NE 16TH AVE
Add			POMPANO BEACH, FL
Remove			33064
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			•
Remove			
6) Change			
Add			<u> </u>
Remove			

f.amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
	

The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	09/03/2015	
Effective date in applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this da he Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.	;)
	re approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	s cast for the amendment(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 shareholde	τ
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
09/03 Dated	/2015	
Signature (XPRentha Renteria	
E) Se	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other courpointed fiduciary by that fiduciary)	1
	BERTHA RENTERIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·