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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	OMEGA ELECTI	RIC OF MIAM	I CORP			
DOCUMENT NUMBER:	P20000005551					
The enclosed Articles of Amenda	nent and fee are submi	itted for filing.				
Please return all correspondence of	concerning this matter	to the followin	g:			
		LUIS CAST	ΓRO			
	Name of Contact Person					
	OMEGA ELECTRIC OF MIAMI CORP					
	Firm/ Company					
	1701 W 37 ST, UNIT 17					
· ·	Address					
	HIALEAH, FL 33012					
	City/ State and Zip Code					
	LUIS	@OMEGAEL	ECTRIC.OF	kG		
E-mai	l address: (to be used	for future annua	al report not	ification)		
For further information concernin	g this matter, please c		305	558-5858		
Name of Contact I	erson .	at (Area Code d	& Daytime Telephone Number		
Enclosed is a check for the follow	ring amount made pay	able to the Flor	ida Departn	ent of State:		
-	ificate of Status	\$43.75 Filing Certified Copy (Additional copenciosed)	y	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

OMEGA ELECTRIC OF MIAMI CORP.

OMEGA ELECTRIC OF	MIAMI, CORT.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P20000005	551
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	Iorida 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." "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "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>)	
	70
	2070 DEC 1
C. Enter new mailing address, if applicable:	C C C
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	جوتر محب
	9.
	28
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(C) : L · · ·	The state of the s
(Florida stree	et daaress)
New Registered Office Address:	Florida
(0	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Res	gistered Agent, if changing
- 3 - 3 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7	, ,, ,,

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>	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>	Address		
1) Change	P	NICOLE CASTRO	1701 W 37 ST, UNIT 17		
X Add			HIALEAH, FL 33012		
Remove	VP	LUIS CASTRO	1701 W 37 ST, UNIT 17		
2) X Change Add			HIALEAH, FL 33012		
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
,	
	
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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		12/7/20	020			
The date of each a) adoption:				_, if other than the
date this document	was signed.					
Effective date <u>if ar</u>	nlicables	12/7/2020				
Effective date it at	pnicable	(no m	ore than 90 days	after amendment fil	e date)	
		s block does not meet Department of State's		tatutory filing requi	rements, this date will	not be listed as the
Adoption of Amen	dment(s)	(CHECK C	<u>)NE</u>)			
The amendment action was not re		adopted by the incorpo	orators, or board o	of directors without	shareholder action and	shareholder
		adopted by the shareho sufficient for approva		per of votes east for t	the amendment(s)	
		approved by the shareh				
"The numl	ber of votes c	ast for the amendment((s) was/were suff	icient for approval		
by				"		
•		(voting grou	ир)			
Ω	12/ Pated	7/2020	<u> </u>			
		LNatt	<u>// </u>			
S	ignature					_
	sele	a director, president protected, by an incorporate printed fiduciary by that	or – if in the hand:			
		LUIS C	CASTRO			
		(Typed	or printed name of	of person signing)		
		VICE P	RESIDENT			
		(Title of	f person signing)			