P22000059141

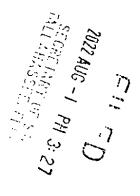
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FIRECOMM ELE	ECTRIC CORP					
DOCUMENT NUMBER: P22000059141						
The enclosed Articles of Amendment and fee are so	ubmitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
VICTOR MENENDEZ	VICTOR MENENDEZ					
	Name of Contact Persor					
FIRECOMM ELECTRIC CO	FIRECOMM ELECTRIC CORP					
	Firm/ Company					
2075 POLO GARDEN DR	2075 POLO GARDEN DR APT 102					
Address						
WELLINGTON FL 33414						
	City/ State and Zip Code					
VICTOR.MENENDEZ1985	@gmail.com					
E-mail address: (to be u	sed for future annual report	notification)				
For further information concerning this matter, plea	ise call:					
VICTOR MENENDEZ	at (at (1,				
Name of Contact Person	Area Coo	de & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Depa	irtment of State:				
S35 Filing Fee S543.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) FIRECOMM ELECTRIC CORP (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 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) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 Doc 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	PT	John Doe	
\underline{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
!) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
CORRECTING MY LAST NAME IS: MENENDEZ	
	_
	<u></u>
	<u> </u>
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. If an amendment provides for an exchange, reclassification, or cancellation of issued sha	res,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s) and date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendmen	u file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east flicient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. To each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for approv	al
by	(voting group)	
	(voting group)	
Dated	27-22	
a:	<u></u>	
selected	rector, president or other officer – if directors or office, by an incorporator – if in the hands of a receiver, used fiduciary by that fiduciary)	cers have not been rustee, or other court
	VICTOR MENE	NOEZ
	(Typed or printed name of person signing)
	(Title of person signing)	