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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Altech Electric OF Central FL, INC
DOCUMENT NUMBER: <u>1998000020737</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Arlene Valdez Name of Contact Person
AHech Electric Firm/Company
7224 Chancery LN Address
Orlando FL 32809 City/ State and Zip Code
Cirlenee Alt-chelectric.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
at (407) 857-7879
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:
S35 Filing Fee Scrifficate of Status Status Status Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	OF Central	Plorida, Inc.	•
(Name of Corporation as curren	tly filed with the Florid	la Dent. of State)	
P98000080732		<u>.</u>	
(Document Numb	er of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation ado	pts the following
A. If amending name, enter the new name of t	he corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profests. B. Enter new principal office address, if applied (Principal office address MUST BE A STREET) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	lesignation "Corp," "In ssional association," or cable: ADDRESS)	c," or "Co". A professional c	orporation 10 Hay 17 PH 2: 24
	***************************************	3	- 2 -
D. If amending the registered agent and/or res	gistered office address i	مرح in Florida, enter the name of t	he I
new registered agent and/or the new register		Ê	
Name of New Registered Agent:			2:24 STEEL
New Registered Office Address:	(Florida street	address)	79
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			e position.

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)

<u>Title</u>	Name	Address	Type of Action
<u>s</u>	Vickie M Leclair	236 Jackson Street Twarivers WI 54241	Add Remove
			☐ Add ☐ Remove
- 			☐ Add ☐ Remove
	g or adding additional Articles, enter of sional sheets, if necessary). (Be specifi		
provisions	ndment provides for an exchange, recla for implementing the amendment if n applicable, indicate N/A)		
	·····		

The date of each amendment	(s) adoption: $5-13-10$
Effective date if applicable:	(date of adoption is required)
Enecute date it applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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	(voting group)
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	05/13/10
sele	a director, president or other officer if directors or officers have not been cted, by an incorporator – if in the hands on a receiver, trustee, or other court
арра	pinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	<u>ν</u> , ρ.
	(Title of person signing)