P99000088982

(Re	questor's Name)	· · · · ·
(Adi	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
12 OCT -4 AM 9: 55

OCT 0 8 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Universal U BER: P9900008898	Underground Utili 2	ty, Inc.	
	of Amendment and fee are sui			
	spondence concerning this mat	_		
	Tammy Short			
		Name of Contact Person		_
	Universal Under	ground Utility, Inc		
		Firm/ Company		
	475 15th Street S	• •		
		Address		_
	Naples, FI 34117			
		City/ State and Zip Code		
adr	min@taswfl.com			
		ed for future annual report ne	otification)	
For further information	n concerning this matter, pleas	se call: at (239	、 44 9-4881	
	of Contact Person		& Daytime Telephone Numb	er
	r the following amount made		ment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	* *
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Division Clifton E 2661 Ex	nent Section of Corporations) *×

Articles of Amendment Articles of Incorporation



Universal Underground Utility, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) PRODUNDASSES

ndment(s) to

1 9900000000	
(Document Number of Corpor	ration (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporate	tion:
N/A	The new
	poration," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	N/A
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the
new registered agent and/or the new registered office:	
Name of New Registered Agent N/A	
(Fl	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	

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 D	ooe	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addreş</u> s
1) Change	V/S/I	D	William Eric Short	475 15th Street SW
XAdd				Naples, Fl 34117
Remove				
2) Change		_		
Add				
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Ramova				

(Attach ac	ing or adding add Iditional sheets, if	ditional Article	es, enter chang	e(s) here:		
N/A	amonui sneets, tj	necessury).	ъе ѕресіјіс)			
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. <u>If an ame</u>	ndment provides	for an exchan	ge, reclassifica	tion, or cancella	tion of issued sh	ares,
<u>provisio</u>	ns for implementi ot applicable, indi	ing the amend	ment if not cor	tained i <u>n the</u> an	endment itself:	
N/A	и иррисиоте, тип	cuie IVA)				
14/7						
	-				-	

The date of each amendment(s) a	October 1, 2012	
Effective date if applicable:	October 1, 2012	
mappineasie.	(no more than 90 days a	fter amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number ufficient for approval.	of votes cast for the amendment(s)
	proved by the shareholders through voti r each voting group entitled to vote sept	
"The number of votes cas	t for the amendment(s) was/were sufficient	ent for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without share	eholder action and shareholder
Dated X	Oct. 1, 2012	
(By a select	director, president or other officer – if ded, by an incorporator – if in the hands onted fiduciary by that fiduciary)	irectors or officers have not been
	Tammy Short	
	(Typed or printed name of	person signing)
	President/Director	
	(Title of person signing	<u> </u>