## 519759

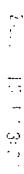
(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: Chinchor	Electric Inc	
DOCUMENT NUMBER: _	519759		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
<u></u>	Timothy I	Name of Contact Person	
	Chincher E	Firm/ Company	
	1460 South	Le covitt Aver Address	nue
	Orange cir	Ty, FL 32763 City/ State and Zip Code	
	-mail address: (to be us	Chiochorelec- ed for future annual report	notification)
For further information conc	erning this matter, pleas	se call:	
Zachary !	Sucosians act Person	at ( <u>38 </u> Area Coo	1 774 - 1020 le & Daytime Telephone Number
Enclosed is a check for the fo			
☐ \$35 Filing Fee	IS43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations	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

Chinchor Electric, Inc. (Name of Corporation as currently	filed with the Florida Dept. of State)
519759	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	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."	mpany," or "incorporated" or the abbreviation "Corp.,"
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)	N/A
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent N/A	
	at addrases
New Registered Office Address: NA (6	Florida City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	ich and annual than obligations of the position
I hereby accept the appointment as registered agent. I am familiar wi	in and accept the omigations of the position.
Signature of New Rea	gistered Agent, if changing
Check if applicable	Zanto en 1182 in A consideral

 $\Box$  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)

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 Doe		
-				
X Remove	<u>V</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>ıe</u>	Address
1) Change	<u> </u>		lariah Anselmo	2401 Lane Street
🔀 Add				Deltona, FL 32738
Remove				
2) Change	_\$_	_ <u>~</u>	ariah Ansumo	2401 Love street
Add				Deltona, FL 32738
X Remove Change	_S_	_ <b>b</b> c	athryn M. Quintane	<u> </u>
_ <b>X</b> _ Add				3529 Patron Ave
Remove				Deltona FL, 32738
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_	<del></del>	
Add				
Remove				

	ing additional Articets, if necessary).	(Be specific)			
N/A					
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<u>an amenoment pi</u> provisions for imn	rovides for an exch lementing the ame	ndment if not co	ation, or cancena ntained in the ar	nendment itself	:
(if not applicab	le, indicate N/A)				-
10					
N/A					
	•				
	-		<u></u>		

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The date of each amendment(s) adoption:date this document was signed.	April 1st, 2021	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :April	(no more than 90 days after amendment file da	
	(no more than 90 days after amendment file da	ne)
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirem f State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) ( <u>Cl</u>	HECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shar	eholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the approval.	amendment(s)
	he shareholders through voting groups. The follo g group entitled to vote separately on the amenda	
"The number of votes cast for the amo	endment(s) was/were sufficient for approval	
by	oting group)	
(vo	ting group)	
Dated 4/13/202	1	
Signature	00 1	
	sident or other officer – if directors or officers has corporator – if in the hands of a receiver, trustee, or	
	y by that fiduciary)	
	(Typed or printed name of person signing)	<u>-</u>
	(Typed or printed name of person signing)	
+	RESIDENT	
	(Title of person signing)	<del>-</del>