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R. WHITE

LARY OF STATE ASSEE, FLORIDA

13 DEC -9 PH 3:

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: Superior El	ectric of South I	Florida, Inc		
DOCUMENT NUMB	_{ER:} S82108				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	1		
Please return all corres	pondence concerning this ma	tter to the following:			
	Nancy Prophitt				
-		Name of Contact Person	1		
	Superior Electric of South Florida, Inc				
-		Firm/ Company			
	1414 Cypress Dr	ive			
Address					
<u>.</u>	Jupiter, FL 3346	9			
		City/ State and Zip Cod	e		
Lira	@secfla.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Lira Demiraj		at (561	, 575-4016		
Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O.	ing Address Indment Section Identification Identifi	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED 13 DEC -9 PH 3:31

Superior Electric of South Florida, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of Corporation as currently	filed with the Florid	a Dept. of State)	ransae, reu rina
S82108			
(Document Number of	of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Floring its Articles of Incorporation:	da Statutes, this <i>Flori</i>	da Profit Corporation ado	pts the following amendment(s)
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	rp," "Inc," or "Co".	A professional corporati	ited" or the abbreviation on name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL			
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>BOX</u>)		
			<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered agent and/or the new registered agent age	tered office address i	n Florida, enter the name	of the
Name of New Registered Agent			
	(Florida street ac	ddress)	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.		and accept the obligations	of the position.
Signature of	New Registered Agen	, if changing	

address of each Office (Attach additional shee Please note the officer/ P = President; V = Vic Executive Officer; CFC held. President, Treasu Changes should be note	er and/or Dets, if necess director title te President O = Chief F arer, Directo ed in the folle between the co	ary) e by the first letter of the office title: ; T= Treasurer; S= Secretary; D= Director; TR= Trinancial Officer. If an officer/director holds more or would be PTD. Ilowing manner. Currently John Doe is listed as the orporation, Sally Smith is named the V and S. These	Frustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is
X Remove	<u>v</u>	Mike Jones	
_X Add	 <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	PS	NANCY PROPHITT	1414 Cypress Dr, Jupiter,
2) Change	PS	ALLAN W PROPHITT	1414 Cypress Drive, Jupiter
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change			

Remove

ttach <i>additional sheets</i> ,	if necessary).	cles, enter change(s) here: (Be specific)	
			· · · · · · · · · · · · · · · · · · ·
an amendment provide rovisions for implemen (if not applicable, inc	nting the amer	ange, reclassification, or cancellation of issued share ndment if not contained in the amendment itself:	<u>s.</u>
(у пог иррисиоле, т	uicuie WA)		
			

The date of each amendment(s) adoption:	· · ·	, if other than the
date this document was signed.		
Effective date if applicable:		
(no more than 90 days after amendment file date)	•	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)		
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.		
The amendme.:(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Dated		
Signature		
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court		
appointed fiduciary by that fiduciary)		
Allen W Prophith. (Typed or printed name of person signing)		
(Typed or printed name of person signing)		
- President		
(Title of person signing)		