P03000130534

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SCOOK DAY OF STATE
TALLAHASSEE, FLORID

C. GOLDEN

OCT -3 2017

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Americo Roofing Systems, Inc. DOCUMENT NUMBER: P03000130524
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steven Bouscher Name of Contact Person American Roofing Systems, Inc.
5706 Swamp Fox rd. Address
Jacksonville, Fl. 32210 City/ State and Zip Code
City/ State and Zip Code
Steven bouseher @ ATT-net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steven Bouscher at 904 525-2517/258-2270 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:
\$35 Filing Fee

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

FILED

	Articles of file	or bor action		
Americo Roo. (Name of Co	fing Syste	ms.Inc.	2017 OCT -	2 AM 10: 44
(Name of Co	rporation as currentl	y filed with the Florida Der	ot. of State)	LUF STATE
P03000130E	24		19	er FLURIDA
		Corporation (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this	Florida Profit Corporation 8	adopts the following	g amendment(s) t
A. If amending name, enter the new name of	System	s, Inc.		_The _new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "	Co". A professional corpor	oorated" or the at ration name must o	ontain the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREI</u>		5706 Swa Jacksonville	mp Fox	<u>rd.</u>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		5706 Swam Jacksonville		
D. If amending the registered agent and/or	magistared office add			<u></u>
new registered agent and/or the new reg			inte or the	
Name of New Registered Agent				-
	(Florida str	eet address)		-
New Registered Office Address:			. Florida	
nen negisteren omte numess.		(City)	(Zip (Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered .	ing Registered Agent agent. I am familiar t	<u>:</u> with and accept the obligatio	ns of the position.	
	Signature of New F	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	PT John	n Doe			
X Remove	V Mik	ke Jones			
X Add	<u>SV</u> <u>Sall</u>	y Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1)Change	$\underline{\rho}$	Edward Tim	othy Warner,	Jr. 1266 Lovett.	cil.
Add Remove			(Prange Park, Fl. 32065	
2)	P	Steven Patri	ek Bouscher	Jacksonville, F.	fox rd.
Remove 3) Change Add	TR	Charles /	Markham	32210	
Remove 4) Change Add				32210	
Remove					
5) Change Add					
Remove					
6) Change					
Add					

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	NA

f an amendment provides for an excl provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
	NA

The date of each amendment(s) addate this document was signed.	option:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
The amendment(s) was/were adoption was not required.	ated by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder
Dated <u> </u>	8/2017
Signature	ter Bouscher
(By a di	rector, president or other officer - if directors or officers have not been
	, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	Steven Bouscher (Typed or printed name of person signing)
•	(Typed or printed name of person signing)
	President
-	(Title of person signing)