P1000033095

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
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SECRETARY OF STATE

Anego 61-9



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 AUG 26 AM 8: 15

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

July 20, 2011

MICHAEL ERIC CHRISTIANSEN MASTRIANA & CHRISTIANSEN PA 1500 NORTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33304

SUBJECT: PERFECTION ROOFING AND CONSTRUCTION, INC.

Ref. Number: P10000033095

We have received your document for PERFECTION ROOFING AND CONSTRUCTION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Oibz. 2mis;

PHOTO COPIES OF SIGNATURES ARE NOT ACCEPTABLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 611A00017126

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	Perfecti	on Ro	ofing a	nd Const	ructi	on, Inc.
DOCUMENT NU	MBER:	P10000033095					
The enclosed Artic	les of Amendmer	t and fee are s	ubmitte	ed for filin	ıg.		
Please return all co	rrespondence con	cerning this m	atter to	the follow	ving:		
-	· · · · · · · · · · · · · · · · · · ·			hristians	en		
		Name	oi Cont	act Person			
_		Mastriana	& Chr	istiansen	, PA		
		F	irm/ Cor	npany			
		1500 Nor	th Fed	eral High	way		
·			Addre	SS			
		Fort Lau	iderdal	e FL 333	04		
-		City/	State and	Zip Code			
	E-mail addre	Mike@n	n-c-law	nnual repor	t notification)		
For further informa	tion concerning t	his matter, ple	ase call	:			
Mic	hael W. Wattne	r	_ at (_	954)	609-2	2277
Name	of Contact Person			Area Code	& Daytime T	elepho	ne Number
Enclosed is a check	for the following	g amount made	payab	le to the F	lorida Depa	ırtmeı	nt of State:
☑ \$35 Filing Fee	\$43.75 Filing Certificate of		Cer	.75 Filing F tified Copy ditional cop	ee & y is enclosed)		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327		Amer Divis Clifto 2661	n Buildin	ction porations g : Center Cir	cle	

Articles of Amendment to Articles of Incorporation of

Periection Roo	offing and Construction, Inc.			
(Name of Corporation as c	urrently filed with the Florida Dept. of	State)		
P	10000033095			
(Document	Number of Corporation (if known)			
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation		fit Corporation adopts	s the follow	ing
A. If amending name, enter the new nam	ne of the corporation:			
Perfection Roo	ofing and Construction, FL Inc.		The new	
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," " B. Enter new principal office address, if (Principal office address MUST BE A STE	the designation "Corp," "Inc," or "Co 'professional association," or the abbrev applicable: REET ADDRESS)	". A professional cor	rporation Zg =	TICLE ON LE OS
D. If amending the registered agent and/ new registered agent and/or the new r		enter the name of the	ļ	
Name of New Registered Agent:	Michael Eric Christiansen	<u></u>		
New Registered Office Address:	1500 North Federal Highway (Florida street address)			
	Fort Lauderdale (City)	, Florida <u>33304</u> (Zip Code)		
New Registered Agent's Signature, if cha I hereby accept the appointment as registere	ed agent. Ham familiar with and accept t		osition.	
	Signature of New Registered Agent if	nhanaina		

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)

Type of Action Title <u>Name</u> Address ☐ Add ☐ Remove Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

The date of each amendment	t(s) adoption: _July 01, 2011
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_July Signature	01, 2011
	a director, president or other officer - if directors or officers have not been
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other court
арро	ointed fiduciary by that fiduciary)
	Michael W. Wattner
	(Typed or printed name of person signing)
	President ·
	(Title of person signing)