## P1800000 6793

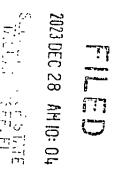
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORI	PORATION:HIGH PITCH RO	OOFING INC		
DOCUMENT NU	P18000006703			
The enclosed Artic	des of Amendment and fee are su	ibmitted for filing.		
Please return all co	prespondence concerning this ma	utter to the following:		
	MAUREEN J SANTELISE	s		
		Name of Contact Person	<u> </u>	
	HIGH PITCH ROOFING IN			
		Firm/ Company		
	PO BOX 770088	· · · · · · · · · · · · · · · · · · ·		
		Address		
	ORLANDO, FL 32877			
		City/ State and Zip Cod	e Table 1	
	info@highpitch.us			
	E-mail address; (to be us	sed for future annual report	notification)	
For further informa	ation concerning this matter, plea	se call:		
MAUREEN I SANTELISES		at (	575-5330	
Nar	ne of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation οf

	of P
HIGH PITCH ROOFING INC	as currently filed with the Florida Dept 818 sate)  at Number of Corporation (if known)
(Name of Corporation	as currently filed with the Florida Dep 281 State)
P18000006793	SOLU 28 AM 10
(Documen	nt Number of Corporation (if known)
rrsuant to the provisions of section 607,1006. Florida St Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the corp	oration:
NIA	The new
ome must be distinguishable and contain the word "corp. Inc.," or Co.," or the designation "Corp." "Inc." o chartered," "professional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ition "P,A."
Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u> )
	•
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
If any ordinate and any	La CC and Library to Photological and the Color
If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent   N/A	
	(Florida street address)
New Registered Office Address:	, Florida
pen regarerea vyjree nuaress.	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registe	ered Agent:
rereby accept the appointment as registered agent. I ar	m familiar with and accept the obligations of the position.
Signatur	re of New Registered Agent, if changing

## Check if applicable

■ 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	MAUREEN J SANTELISES	PO BOX 770088.
Add			ORLANDO, FL 32877
Remove			
2) Change	M	DERLIS FLEITAS	PO BOX 770088.
Add			ORLANDO, FL 32877
X Remove 3 ) Range			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

fan 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	Attach additional sheets, if necessar	v). (Be specific)	nge(s) here:		
f 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)	HI /A				
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	provisions for implementing the a	mendment if not c	ontained in the ar	nendment itself:	<u>r</u>
N/^	(if not applicable, indicate N/A)				
	<u> </u>				
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				·	<del>_</del>
	<u> </u>			<u>_</u>	

The date of each amendment(s) date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the L	block does not meet the applicable statutory filing requirements, this date will not be listed as the department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas MAUREEN J SANT	t for the amendment(s) was/were sufficient for approval ELISES
	(voting group)
DatedSignature	
select	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)
	MAUREEN I SANTELISES
	(Typed or printed name of person signing)
	OWNER
	(Title of person signing)