455516

(Requestor's Name)
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Amend Reme JUL 13 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ROTH BROS. C	OF FLORIDA, INC.		
DOCUMENT NUMBER: 458816			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this r	natter to the following:		
PAUL L. MILLET			
	Name of Contact Person		
MILLET & WEISMAN	· · · · · · · · · · · · · · · · · · ·		
	Firm/ Company		
25550 CHAGRIN BOULE	EVARD, SUITE 403		
	Address		
BEACHWOOD, OHIO 44	122		
	City/ State and Zip Code		
paul@milletweismanlaw.com			
E-mail address: (to be	used for future annual report notification)		
For further information concerning this matter, ple			
Name of Contact Person	at (216) 765-1188		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:		
\$35 Filing Fee & Certificate of Status			
Mailing Address 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 Tallahasses, FL 32301		



Articles of Amendment to Articles of Incorporation of

ROTH BROS. OF FLORIDA, INC.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	
458816			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	s Florida Profit Corporation adopts the following amer	idment(s) to
A. If amending name, enter the new na	me of the corporation:		
ROTH CONSTRUCTION SERVICES,	NC.	The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbrevion." "Co". A professional corporation name must contain	ation
B. Enter new principal office address,	if annlingblar	N/A	
(Principal office address MUST BE A S			_
			 .
C. Enter new mailing address, if appli	cable:	NV.	
(Mailing address MAY BE A POST		N/A	
D. If amending the registered agent an new registered agent and/or the new			
	SAMUEL A. ROTH	<u>55.</u>	
Name of New Registered Agent	SAMOLD A. ROTTI		
	40 SEAGATE DRIVE,	PH 03	
	(Florida .	street address)	
New Registered Office Address:	NAPLES	, Florida	
		(City) (Zip Code)	
New Registered Agent's Signature, if c	hanging Pagistared Aga	at.	
		n: r with and accept the obligations of the position.	
•			
_	Lamuella	Dett	•
	amuer a	NOUV.	
	Signature of New	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.

X Change	<u>PT</u>	John Do	<u>ıc</u>	•			
X Remove	¥	Mike Jo	<u>nes</u>				
_X Add	<u>sv</u>	Sally Sn	nith				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) Change		_					
Add							
Remove							
2) Change		_					
Add							
Remove							
3) Change		_					
Add				•			
Remove							· · · · · · · · · · · · · · · · · · ·
4) Change		<u></u>			_		
Add							. <u>.</u>
Remove							
5) Observe							
5) Change		_	-	 			
Add Remove							
Kemove							
6) Change		_					
Add							•
Demove							

L. If amending or adding additi (Attach additional sheets, if near	essary). (Be specific,			
I/A				
				
				,
				
	···			
		·		
		•		
				٠

If an amendment provides fo	r an exchange, reclassi	fication, or cancellati	on of issued shares.	
provisions for implementing	the amendment if not	contained in the ame	ndment itself:	
(if not applicable, indica	e N/A)			
/A				
				·
				
			,, , , , , , , , , , , , , , , , , , ,	·

date this document was signed.	ption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement sch voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adop action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ed by the incorporators without shareholder action and shareholder
Dated Jul	4 2, 2015 amino a Roth
Signature	ctor, 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 I fiduciary by that fiduciary)
S	AMUEL A. ROTH
	(Typed or printed name of person signing)
F	RESIDENT
_	(Title of person signing)