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2022 FEB - 7 AM 8: 1 SECRETARY OF STAT

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## **COVER LETTER**

TO: Amendment Section 😁

Division of Cor	porations ,					
NAME OF CORPO	ORATION: A-1 Roof Trusses	Ltd., Company				
	1BER:					
The enclosed Article	s of Amendment and fee are su	abmitted for filing.				
Please return all corr	espondence concerning this ma	atter to the following:				
	Tom Sennou					
		Name of Contact Person	n			
	A-1 Industries of Florida, Inc.					
	Firm/ Company					
	4451 St. Lucie Blvd.					
	Address					
	Ft Pierce, FL 34946					
		City/ State and Zip Cod	נ			
	tom.sennott@altruss.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
Jessica Fornaro		772 at (	409-1011 ext. 300			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
	nendment Section vision of Corporations		lment Section on of Corporations			
	). Box 6327	The Centre of Tallahassee				
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810				
		Tallahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation of

## FILED

A-1 Roof Trusses Ltd., Company

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( <u>Name e</u>	of Corporation as current	thy filed with the Florida Dept of State) AND OF STATE TALL AHASSEE, FL
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
A-1 Industries of Florida, Inc.		The new
	Corp, " "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:		N/A
(Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	N/A	
	(Florida st	reet address)
New Registered Office Address:	N/A	. Florida
NOT MEMORIE COMCESSION		. Florida (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agen	t:
I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.

Check if applicable

 $\square$  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:

<u>X</u> 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) N/A Change			
Add			
Remove			
2) N/A Change			
Add			
Remove 3 ) N/A Change			
Add			
Remove			
4) N/A Change			
Add			
Remove			
5) N/A Change			
Add			
Remove			
6) N/A Change			
Add			
Remove			

r. <u>11 a</u> (Atta	mending or adding additional Ar ach additional sheets, if necessary).	(Be specific)	<u>ve(s) here</u> :			
N/A						
			- <u></u> -		·	
-			<del></del>			
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					<del></del>	
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: If an	n amendment provides for an exc	hange reclassific	ation or cance	Nation of issued	charec	
pro	ovisions for implementing the amo	endment if not co	ntained in the	amendment itse	lf:	
	(if not applicable, indicate N/A)					
N/A				_ <del></del>		
	,					
			<del></del> -			

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)
<b>Note:</b> If the date inserted in this block does not meet the applical document's effective date on the Department of State's records.	ble statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
➤ The amendment(s) was/were adopted by the incorporators, or be action was not required.	ard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The reby the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throw must be separately provided for each voting group entitled to ve	
"The number of votes cast for the amendment(s) was/were	sufficient for approval
bv	."
by(voting group)	
Dated 2/2/2022	<del></del>
Signature(By a director, president or other office	r - if directors or officers have not been
	hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
JAN S. R	
(Typed or printed na	me of person signing)
SECRETAG	2 Y

(Title of person signing)