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(F	Requestor's Name)	·
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(0	City/State/Zip/Phone	#)
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C. CARE OTHERS

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: D	AVID LEE ROOFI	NG & SHEETMETA	L, INC		
DOCUMENT NUMBER: P0000					
The enclosed Articles of Amendme	ent and fee are subm	sitted for filing.			
Please return all correspondence co	ncerning this matter	to the following:			
NICK LEE					
	Name of Contact Person				
		Firm/ Company			
90775 OLD	90775 OLD HIGHWAY UNIT 7				
	Address				
TAVERNIE	TAVERNIER, FL 33070				
	City/ State and Zip Code				
NICHOLASLEE0	07@GMAIL.COM				
E-mail	address: (to be used	for future annual repo	ort notification)		
For further information concerning	this matter, please c	all:			
NICK LEE		at (852-4833		
Name of Contact Po	rson	Area (Code & Daytime Telephone Number		
Enclosed is a check for the following	ig amount made pay	able to the Florida De	epartment of State:		
	5 Filing Fee & [\$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 Sect Division of Corpe P.O. Box 6327 Tallahassee FL 3	on orations	Ame Divi: Clift	et Address Industrial Section Ission of Corporations Industrial Security of Contentions Industrial Security of Contentions		

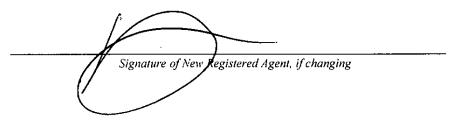
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

(Name of Corporation:	s currently filed with the Florida Dept. of	State)
DAVID LEE ROOFING & SHEETMETAL, INC.		
(Document	Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts	s the following amendment(s
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word ' "Corp.," "Inc.," or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abl	Inc," or "Co". A professional corporation	ed" or the abbreviation name must contain the
B. Enter new principal office address, if applicable:	90775 OLD HIGHWAY UNI	Г7 — ~
Principal office address <u>MUST BE A STREET ADDRE</u>	TAVERNIER, FL 33070	
		F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	90775 OLD HIGHWAY UNIT	- 6 SEC.F. A
(TAVERNIER, FL 33070	977
	·····	
D. If amending the registered agent and/or registered	office address in Florida, enter the name o	f the
new registered agent and/or the new registered off		<u></u>
NICK LEE Name of New Registered Agent		
90775 OLD H	GHWAY UNIT 7	
	(Florida street address)	
New Registered Office Address: TAVERNIER	Flo	33070 orida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



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 <math>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) Change	P	DAVID LEE	PO BOX 9494
Add			TAVERNIER, FL 33070
X Remove			
2) X Change	P	NICK LEE	90775 OLD HIGHWAY UNIT 7
Add			TAVERNIER, FL 33070
Remove			
3) Change			
Add			
Remove			
4) Change			·····
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach add	ng or adding additi ditional sheets, if ned	cessary). (Be s _i	pecific)			
provision	ndment provides for implementing to applicable, indicated to applicable, indicated to applicable applicable.	the amendment	eclassification tif not contain	s, or cancellation ned in the amend	n of issued share Iment itself:	<u>S.</u>

01/01/2016	*C. Alexandran Ale
The date of each amendment(s) adoption:	, if other than the
01/01/2016	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by`` (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
Dated	
Signature (By a director, prosident or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	een court
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESZDENT	
(Title of person signing)	