

PO1000103707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Change of corporate name 10/17/07.
KSP

Office Use Only



200108231672

FILED

07 OCT 19 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KSP
10/19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2007

ROOFMASTERS, INC.
P.O. BOX 2050
INTERLACHEN, FL 32148

SUBJECT: ROOFMASTERS, INC.
Ref. Number: P01000103707

This is to advise you that on, October 24, 2001, we filed your corporation under the above name, which was not available.

Therefore, we request that you file an amendment, at no charge, to change the name of your corporation to make it distinguishable from the existing entity. We have enclosed forms and guidelines for your assistance.

We apologize for this inconvenience and trust that you understand the urgency in completing this amendment, and returning it along with a copy of this letter to my attention as soon as possible.

If you have any questions, please call (850) 245-6924.

Sincerely,

Stacy Prather
Document Specialist Supervisor
New Filing Section

Letter Number: 507A00057568

COVER LETTER

TO: ~~_____~~
Division of Corporations

NAME OF CORPORATION: Roofmasters Inc

DOCUMENT NUMBER: PO 1000 103707

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Crosby
(Name of Contact Person)

(Firm/ Company)

P.O. Box 2050
(Address)

Interlachen Fl. 32148
(City/ State and Zip Code)

For further information concerning this matter, please call:

James Crosby at (352) 871-3741
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certificate of Status
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Roofmasters Inc

(Name of corporation as currently filed with the Florida Dept. of State)

P01000103707

(Document number of corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 OCT 19 PM 1:01

FILED

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

FL Roofmasters Inc.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: _____

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature _____

(By a director, 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 appointed fiduciary by that fiduciary)

James A. Crosby
(Typed or printed name of person signing)

President
(Title of person signing)

FILED
07 OCT 19 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA