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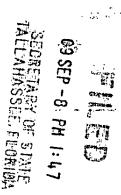
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N.C. C.COULLIETTE

SEP 1 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: ROCKY	s Roofing Co, Inc			
DOCUMENT NUMBER: P02000	8084800			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Shann C Name of	Contact Person			
Rockys Roof	Company			
	Avenue			
SW RAnches, City State	FL 33332 c and Zip Code			
ROCKUSTOOFINGING annual report notification) Remail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
	1954 324-6426			
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Sertified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Amendment Section A Division of Corporations D P.O. Box 6327 C	treet Address mendment Section livision of Corporations lifton Building 661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ROCKVIS ROO	fina co. Ir	nC	
(Name of Corporation as curr	ently filed with the Florida	Dept. of State)	
P02000	084868		
(Document Nur	mber of Corporation (if know	va)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	16, Florida Statutes, this Flo	orida Profit Corporation ad	opts the following
A. If amending name, enter the new name of	of the corporation:		
Rocky's Roofing C	O, Inc.II		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp." "Inc.	" or "Co". A professional.	ed" or the corporation
B. Enter new principal office address, if app	olicable:		
(Principal office address MUST BE A STREE			
			9
	 -	5	
C. Enter new mailing address, if applicable	<u>>:</u>	Signal Control	် တ
(Mailing address MAY BE A POST OFF)	<u>CE BOX</u>)	2-1	
	 -	<u></u>	
	 		류 그
D. If amending the registered agent and/or new registered agent and/or the new registered		Florida, enter the name of	the
	stered outse adoress:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street aa	ldress)	
	(6):	, Florida	
	(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.			
	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)

Title	Name	Address	Type of Action
			
(anach t	addisional sheets, if necessary). (Be sp	• •	
provis	imendment provides for an exchange, in ions for implementing the amendment not applicable, indicate N/A)		
			

The date of each amendment(s) adop	tion: <u>07-01-09</u>			
	(date of adoption is required)			
Effective date if applicable: (no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) tient for approval.			
The amendment(s) was/were approx must be separately provided for each	ved by the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):			
"The number of votes cast for t	the amendment(s) was/were sufficient for approval			
by	19			
(voting	group)			
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder			
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder			
DatedQ	3-69			
Signature	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)			
	Shannon Oavis			
	_Typed or printed name of person signing)			
	Prosident			
	(Title of person signing)			