P03000114951

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	; #)
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(Dc	ocument Number)	
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JUN 1 6 2015

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MIAMI ROOFING	G SYSTEMS, INC			
DOCUMENT NUMB					
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	XAVIER VITERI				
•		Name of Contact Perso	n		
	VITERI FINANCIAL CORE	PORATION			
-		Firm/ Company			
1	6721 SW 69 TERRACE	Time Company			
-		Address			
	MIAMI, FL 33143		•		
-		City/ State and Zip Cod	ė		7
			_	:	ζ,
XAVI	ER@VITERIFINANCIAL.C			_ 5'	
	E-mail address: (to be u	sed for future annual report	notification)		ن
For further information	concerning this matter, plea	se call:		•	3
				<i>:</i>	
XAVIER VITERI		786 at (262-1237		ν.
Name of Contact Person		Area Co	de & Daytime Telephone N	umber	_
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

of MIAMI ROOFING SYSTEMS, INC (Name of Corporation as currently filed with the Florida Dept. of State) P03000114951 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendiment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (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.

Page I of 4

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.

Example: X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VPD	JAVIER MARTINEZ JR.	7552 BUCCANEER AVENUE
Add			North Bay Village, FL
X Remove			33141
2) Change Add X Remove	VPD	ANDRES MARTINEZ	7552 BUCCANEER AVENUE NORTH BAY VILLAGE, FL 33141
3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			···
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment isself: (if not applicable, indicate N/A)	Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)		
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	provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
nate this document was signed	
Effective date <u>if applicable</u> :	er amendment file date)
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Note: If the date inserted in this block does not meet the applicable status document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number o by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficien	it for approval
by	35
(voting group)	SEC.
☐ The amendment(s) was/were adopted by the board of directors without sh action was not required.	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareh action was not required.	
Dated06/02/15	
Signature	
(By a director, president or other officer – if directed, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
SUSANA MARTINEZ	
(Typed or printed name of pe	erson signing)
PD	
(Title of person s	igning)