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COVER LETTER

Division of Corporations				
NAME OF CORPORATION: METZ	onstruction & Roofing, Inc.			
DOCUMENT NUMBER: \$\frac{1}{20001}\$	19318			
The enclosed Articles of Amendment and fee are sub	omitted for tiling.			
Please return all correspondence concerning this matt	ter to the following:			
RickM	ETZ_			
METZ CON	711-11-11-11-11-11-11-11-11-11-11-11-11-			
1616 Gul	Firm/Company Firm/Company Blud.			
ClEARMATE	ER PL. 33755			
7.10.0	City/\$tate and Zip Code			
Kicke Built BAMETZ. COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	z call:			
RICKMETZ	ar, 727, 656-1772			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			
	Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation Corporation as currently filed with the Florida Dept. (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name enter the new name of the corporation: The new 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: 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)

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name Daniel Toponium	Address 110110 Culf To Box Blu
1) Change Add Remove	<u>D</u> _	PATRICK IROCAND	Clearwater, FL 3375
2) Change Add Remove	<u>D</u>	Ashton Artman	1616 Gulf To Bry Blud Cleverunter, FL 3375
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f an amendment provides for an 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)	If amending or adding addition (Attach additional sheets, if nece.)	sary). (Be spec	cific)	<u></u> .		
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(i) not applicable, indicate N/A)	provisions for implementing t	<u>re amendment if</u>	f not contained	in the amendm	ent itself:	
	(іј пот аррисавіе, таксаге	V/A)				
			·			
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment fil	e date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	he amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The families the separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder .
Dated (25)14	
Signature	
(By a director, resident or other officer - if directors or officers	
selected by an incorporator – if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by that fiduciary)	
. (Typed or printed name of person sign	ing)
PES.	
(Title of person signing)	