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C. BRUMBLEY NOV - 3 2021

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: BRIFIN Silves DOCUMENT NUMBER:

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

Please return all correspondence concerning this matter to the following:

Brian Silves
Name of Contact Person
Brian Silves Boofing, Inc.
Firm/ Company
1550 S. Hwy 17 92
Address
Longwood, FL 32750
City/ State and Zip Code
BRIAN @ BRIAN Silves Roafing. Com
E-mail address: (to be used for future annual report notification))

For further information concerning this matter, please call:

at í

Name of Contact Person

Area Code & Davtime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Street Address

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Article	es of Amendment
	to
Articles	of Incorporation
BRIAN Silves BC	of ATINA, INC irrently filed with the Florida Dept. of State)
	rently and with the Florida Dept. of State)
<u> </u>	
	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
	The new
"chartered," "professional association," or the abbreviation B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. <u>If amending the registered agent and/or registered offic</u> new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	(Chy) (Xip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> 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

Check if applicable

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□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

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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>John E</u>	Doc	
<u>X</u> Remove	<u>V</u> <u>Mike</u>	lones	
<u>X</u> Add	<u>SV</u> <u>Sally</u> S	Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		Sherri Sihes	4075 Crestwood Mame Dr.
_X Add			New Smyrna Beach FL 32168
Remove			·V
2) Change			
Add			
A Remove			
Add			<u> </u>
Кеточе			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

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amandmant pro	ovides for an excha	ango roclassifia	ation or sum	allation of icc	ad charac	
visions for imple	ementing the amer	ndment if not co	ntained in the	amendment	itself:	
(if not applicable	e, indicate N/A)					
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The date of each amendment(s) :	idention: September, 29th 2021	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	September 29th, 2021	<u></u>
	(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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- □ The amendment(s) was/were adopted 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 BRIAN Silves Rosting Inc. "

Dated September 29th, 2021

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)

(Typed or printed name of person signing)

(Title of person signing)

delelele ζ ζ Manes hansferable only on the books of the Canporation by the holder henef in person or by Attorney upon surrender of this Certificate property endorsed. 感じる事 OF THE COMMON STOCK OF BRIAN SIKES ROOFING, INC. WHICH IS FULLY PAID AND NON-ASSESSABLE has coursed this Corrilicates to be signed urea X 9. 2021 rhorade Seal to be hereunload HARE ζ く今く OCK; \$1:00 PARVALUE BRIAN SIKES ROOFING ING SEPTEMBER. INCORPORATED UNDER THEILAWS VER 大いたの In Witness Wherent, Messaid Corporation, by its duly unforiged afficers und SHERRI SIKES <u>erenene</u> ONE registered holderal A Reca. ς と確認と命説 මුළුලුලුල PRESIDEN UMBE る言語 ζ

FORM S. F. E.

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The following abbreviations, when used in the inscription on the face of this certificate, shall be construed as though they were written out in full according to applicable laws or regulations.

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TEN COM	- as tenants in common	UNIF GIFT MIN ACTCustodian	
TEN ENT	- as tenants by the entireties	(Cust) (Mino under Uniform Gifts to Mino	
JT TEN	 — as joint tenants with right of survivorship and not as tenants in common 		-

Additional abbreviations may also be used though not in the above list.

PLEASE INSERT SOCIAL SECURITY OR OTHER	hereby sell, assign and transfer unto
592 74 4401	
SHERRI SIKES	; ;
PLEASE PRINT OR TYPE	WRITE NAME AND ADDRESS OF ASSIGNEE
4075 CRESTWOOD MA	NOR DR
NEW SMYRNA BEACH ONE represented by the within Cert and appoint	FL32168Shares Shares ificate, and do hereby irrevocably constitute
Attorney to transfer the said sha tion with full power of substitu Dated, SEPT 29 2021	res on the books of the within-named Corpora- ution in the premises.
In presence of	

_____Baker _____