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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Double C Roofing	, Inc.		
DOCUMENT NUMBE	CR:			
The enclosed Articles of	f Amendment and fee are su	abmitted for fili	ng.	
Please return all corresp	ondence concerning this ma	tter to the follo	wing:	
C	Christopher Baggett			
_		Name of Co	ontact Person	1
r	Oouble C Roofing, Inc.			
_		Firm/ (Company	
1	010 Cedar Ridge Lane			
		Ad	dress	
Г	eLand, FL 32720			
		City/ State a	and Zip Code)
doubled	croofing@yahoo.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information (concerning this matter, pleas	se call:		
Christopher Baggett		at (386	734-9322
Name of	Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the l	Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations fox 6327 assee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Double C Roofing, Inc.				
(<u>Name</u>	of Corporation as curre	ntly filed with the Flor	ida Dept. of State)	
P04000019447				
, , , , , , , , , , , , , , , , , , ,	(Document Number	r of Corporation (if know	vn)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	nis <i>Florida Profit Corpo</i>	ration adopts the following	ng amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A				The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," of	r "Co". A professional		ıbbreviation
B. Enter new principal office address,	if annlicable:	N/A		, ಹ
(Principal office address <u>MUST BE A</u> S		 		: 5 m
			No. of the last of	
				<u> </u>
C. Enter new mailing address, if appl	iaabla			- ₂ D
(Mailing address MAY BE A POST		N/A	ال المارية	
			5	09
			<u> </u>	<u></u>
D. If amending the registered agent ar	nd/or registered office of	idraes in Florida, antar	the name of the	
new registered agent and/or the ne			the name of the	
Name of New Registered Agent	N/A			
Name of New Registered Agent				_
	· · · · · · · · · · · · · · · · · · ·			_
		street address)		
New Registered Office Address:	N/A		, Florida	
		(City)	(Zip	Code)
Now Domintonal Amenda Simulation if		.		
New Registered Agent's Signature, if on the Registered Agent's Signature, if on the Register	nanging Registered Age tered agent. I am familia	:nt: ar with and accent the of	oligations of the position.	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·		- Garage of the framework	
				_
	Signature of Nev	a Registered Agent if ch	anaina	_

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:		iy Smiin, Sr as an Aaa.	
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>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Elyshia Baggett	1010 Cedar Ridge Lane
X Add			DeLand, FL 32720
Remove			<u></u>
2) Change			
Add			
Remove			<u> </u>
3) Change	,= <u></u>	<u> </u>	
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

E. <u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	(Be specific)
N/A	
	
	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
I/A	

_	04/13/18	
he date of each amendment(s) add	ption:	, if other than t
ate this document was signed.		
04/13 ffective date <u>if applicable:</u>	18	
nective date <u>it applicable</u> :	(no more than 90 days after amendment file date)	
ocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):	rt.
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder	
04/13/18 Dated		
Dated	12-12-12	
Signature	ON THE PARTY OF TH	
	ector, president or other officer - if directors or officers have not been	
	by an incorporator - if in the hands of a receiver, trustee, or other court	
appointe	d fiduciary by that fiduciary)	
	Chris Topher Ragge + 1 (Typed or printed name of person signing)	
_	(Typed or printed name of porson signing)	
_	Vice President	
	(Title of person signing)	