P0400138927

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

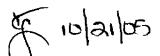




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COVER LETTER

TO: Amendment Section Division of Corporations

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in siAlE

	ALLA	HASSEE PLORIDA
NAME OF CORPORATION: CUSTOM RC	OOF TILE INC	
DOCUMENT NUMBER: P04000138927		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
MELISSA KONITZER		
(Name of C	Contact Person)	
CUSTOM ROOF TILE INC		
(Firm/	Company)	
PO BOX 1245		
(Ac	ddress)	
RUSKIN FL 33575		
	and Zip Code)	
For further information concerning this matter, ple	ease call:	
MELISSA KONITZER	at (<u>813</u>) 641-3500	
(Name of Contact Person)	(Area Code & Daytime Tele	ephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \$43.75 Filing Fee \$\times \$\text{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 Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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ALLAHASSEE FLORIDA

I, ROGER JENKINS	, hereby resign as_	CFO
	, notedy testget us_	(Title)
of CUSTOM ROOF TILE INC		
	of Corporation)	· · · · · · · · · · · · · · · · · · ·
(Document Number, if known)	_, a corporation organized un	der the laws of the State of
FLORIDA	_•	
(S	ignature of resigning officer/direct	lor)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314