P05000040515

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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Amend

JAN - 4 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ROMAN	FRAMING CORP	
DOCUMENT NUMBER: P05000040	515	·
The enclosed Articles of Amendment and fee are		
Please return all correspondence concerning this	matter to the following:	
ROMAN JIMEN	NEZ	
ROMAN FRAM	Name of Contact Persor	1
<u> </u>	Firm/ Company	
1256 HOWLAN	• •	
	Address	
DELTONA, FL	32738	
	City/ State and Zip Code	2
ROMAN42241@H	OTMAIL.COM	
E-mail address: (to b	e used for future annual report	notification)
For further information concerning this matter, p	olease call:	
ROMAN JIMENEZ	a _{t (} 321	, 225-0380
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee Certificate of Statu	-	□\$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 266 I E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



ROMAN FRAMING CORP

(Name of Corporation as currently filed with the	Florida Dept, of State)
P05000040515	
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	SS:
Name of New Registered Agent N/A	
(Florida s	treet address)
New Registered Office Address:	, Florida
(Ciț	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the position.

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 <math>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 Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	CARMEN E TORRES	
X Add			DELTONA, FL 32738
Remove			
2) Change			
Add			
Remove			
3)Change		-	
Add			
Remove			
•4) Change			
Add			
Remove			
5) Change			
Add		•	
Remove			
6) Change			
Add			
Remove			

Anach adamonai shee	<mark>ng additional Arti</mark> ets, if necessary).	(Be specific)	* <u>***</u> ********************************		
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lf an amendment pro	ovides for an eych	iange reclassifi	ication or cane	ellation of issue	d shares
provisions for imple	ementing the ame	ndment if not c	ontained in the	amendment its	elf:
(if not applicable	e, indicate N/A)				
					
					

The date of each amendment(s)	adoption: 12/20/2012
Effective date if applicable: 1	2/20/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(100 17
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 12/20)/2012
Signature	o man
	director, president or other officer - if directors or officers have not been
	ted by an incorporator – if in the hands of a receiver, trustee, or other court
appo	inted fiduciary by that fiduciary)
•	ROMAN JIMENEZ
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)