P05000040515

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PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	_
Consideration to Ellino Office	_
Special Instructions to Filing Officer:	
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Aprend. 03-21-1

DC

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ROMAN FE	RAMING CORP	
DOCUMENT NUMBER: P0500004051	5	
The enclosed Articles of Amendment and fee are sub-		
Please return all correspondence concerning this mat	ter to the following:	
ROMAN JIMENE	7	
TOMAN SIMILINE		·
ROMAN FRAMIN	Name of Contact Person	1
	Firm/ Company	
1256 HOWLAND	, ,	
	Address	
DELTONA FL, 32	2738	
	City/ State and Zip Code	2
ROMAN42241@HO	TMAIL COM	
	ed for future annual report	notification)
•	,	,
For further information concerning this matter, pleas	e call:	
ROMAN JIMENEZ	at (321	225-0380
Name of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	bayable to the Florida Depa	irtment of State:
\$35 Filing Fee \$\sum \$	□\$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	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

ROMAN FRAMING CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P05000040515			
(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> add	opts the following amendment
A. If amending name, enter the new na	ame of the corporation:		
·NA			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corpora	
B. Enter new principal office address,		N/A	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an new registered agent and/or the new			<u>e of the</u>
	NI/A		
Name of New Registered Agent			
	(Florida stre	et address)	
New Registered Office Address:		, Florida_	(Zip Code)
	(City)		(Zip Code)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	tered agent. I am familiar w	tth and accept the obligations	of the position.
	gnature of New Registered A	gent, 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: XChange	<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	OSCAR FONSECA	1625 TOLEDOAVE
X_{Add}			DELTONA FL 32725
Remove			
2) Change	S	CARMEN E TORRES	2485 ACADEMY AVE
Add			DELTONA FL 32738
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			

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

The date of each amendment(s) a	adoption: 03/13/2013
Effective date if applicable:	3/13/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voing group)
action was not required.	lopted by the board of directors without shareholder action and shareholder
→ The amendment(s) was/were ad- action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated 03/13	/2013
Signature	Roman
	director, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
а рроп	ned reducially by that reducially?
	ROMAN JIMENEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)