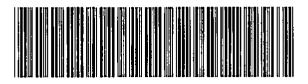
## P05000076049

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## **COVER LETTER**

ΓO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BOWMAN'S QU	JALITY ROOFING & RE	PAIR, INC.		
DOCUMENT NUMB	ER:P05000076048				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please r arn all corres	pondence concerning this ma	tter to the following:			
	CHARLES E BOWMAN, JR				
-	Name of Contact Person				
	BOWMAN'S QUALITY ROOFING & REPAIR, INC.				
		Firm/ Company			
	2391 DEVINE FARM RD				
•	Address				
	CANTONMENT FL 32533				
-		City/ State and Zip Cod	e		
	bowmans	roof@gmail.	com		
	E-mail address: (to be us	sed for future annual report	notification)		
or further information	concerning this matter, pleas	se call:			
HARLES E BOWMAN, JR		at (	_)		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
closed is a check for	the following amount made_	payable to the Florida Dep	artment of State;		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status		
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton	Address  Iment Section  on of Corporations  Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BOWMAN'S QUALITY ROOFING & REPAIR, INC.

P0500	000076048
(Document Number	per of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, t s Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation	<u>1:</u>
	The new
ame must be distinguishable and contain the word "corpord Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o ord "chartered," "professional association," or the abbreviation	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ion "P.A."
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )	
methal office data ess most be his heart heart so	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
manning and reso <u>manned to the second to th</u>	
	<del></del> .;;
If amending the registered agent and/or registered office a	address in Florida, enter the name of the
new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Floride	da street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
Date to the state of the state	
w Registered Agent's Signature, if changing Registered Agereby accept the appointment as registered agent. I am famili	
20.	
hereby accept the appointment as registered agent. I am famili	

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and Idress of each Officer and/or Director being added:

Ittach additional sheets, if necessary)

lease note the officer/director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief xecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office old. President, Treasurer, Director would be PTD.

hanges 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 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, 'ike Jones, V as Remove, and Sally Smith, SV as an Add.

<b>xample:</b> <u>X</u> Change	<u>PT</u>	John Doe	
<u> </u>	<u>V</u>	Mike Jones	
<u>≺</u> Add	<u>sv</u>	Sally Smith	
ype of Action Theck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change	V	CODY L BOWMAN	1700 W GOVERNMENT ST
Add _X Remove			PENSACOLA FL 32502
Change Add			
Remove			<del></del>
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
Add			
Remove			<del></del>
Change		<del></del>	
Remove			

If amending or adding additional Articles, enter change(s) here:						
(Attach additional sheets, if necessary).	(Be specific)					
****						
	<u> </u>					
<del> </del>						
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,					
provisions for implementing the amer	ndment if not contained in the amendment itself:					
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:					

ne date of each amendment(s) adoption:	, if other than the
ite this document was signed.	
ffective date if applicable:	<u> </u>
(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this decument's effective date on the Department of State's records.	ate will not be listed as the
doption of Amendment(s) (CHECK ONE) .	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment( by the shareholders was/were sufficient for approval.	s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statements be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
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 courappointed fiduciary by that fiduciary)	
CHARLES E BOWMAN, JR	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)