P06000012680

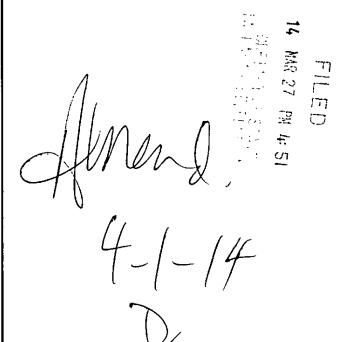
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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03/27/14--01019--008 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Above the	Rest Roofing, In	IC.
	BER: P0600001268		
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	•
	Shawn Hodges, S	Sr.	
		Name of Contact Person	n
	Above the Rest F		
		Firm/ Company	
	7221 Northwest 1	• •	
		Address	
	Pembroke Pines,	Florida 33024	
		City/ State and Zip Cod	е
bee	ebrothers95@gma	ail.com	
		sed for future annual report	notification)
For further information	n concerning this matter, please	se call: at (954	、964-2006
	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made		•
\$35 Filing Fee	☐\$43.75 Filing Fee & 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)
	ling Address	Street	Address
	endment Section		ment Section
	sion of Corporations		on of Corporations
	Box 6327		Building
[21]	ahassee, FL 32314		executive Center Circle

Articles of Amendment to Articles of Incorporation of

Above the Rest Roofing, Inc.	
(Name of Corporation as currently filed with the l	
P06000012680	
(Document Number of Corporation ((if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
NIA	The new
ame 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	"Co". A professional corporation name must contain the
s. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	Pembroke Pines, Florida 33024
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	7221 Northwest 1 Street
	Pembroke Pines, Florida 33024
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent 7221 Northwes	at 1 Street
	treet address)
Pombroko Pino	22024
New Registered Office Address.	, riorida
(City, lew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	<u>t:</u>
Signature of New Registered	

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: X Change	PT Jol	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	,
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PS	Kelly Hodges	7221 Northwest 1 Street
Add			Pembroke Pines, Florida
Remove			33024
2) Change	VT	Shawn Hodges	7221 Northwest 1 Street
Add		•	Pembroke Pines, Florida
Remove			33024
3) Change			
Add			
Remove			<u>-</u>
4) Change			
Add			
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	1	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) A A	NIA		
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MA	provisions for	implementing the amendment if not contained in t	he amendment itself:
	(if not app 	licable, indicate N/A)	·
	NIA		•
	/		
		<u> </u>	
			·
•			
	 		

ate this document was signed.		
ffective date <u>if applicable</u> :		_
	(no more than 90 days after amendment file date)	
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved 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 of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated March	n 25 /2014	
Signature		_ _
	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Kelly Hodges	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	