P06000 094 093

(Requestor's	Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Document I	Number)
Certified Copies Ce	ertificates of Status
Special Instructions to Filing Off	icer:

Office Use Only



400333126914

08/26/18--01010--031 **

brund

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Beaman Roofing Company
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kenneth L. Beaman Name of Contact Person Beaman Roofing Company Firm Company 5523 Dubonnet Drive
Address
Fairtield OH 45014
City/ State and Zip Code
beaman 1 @ aol. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keyneth L. Beaman at (513) 939-2080 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment

to

Articles of Incorporation

of	poration	
Beaman Roofing Cor	nany	
(Name of Corporation as currently f	iled with the Florida Dept, of Sta	<u>ite</u>)
P06000094093		
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatistical Actions</i> of Incorporation:	orida Profit Corporation adopts th	e following amendment
A. If amending name, enter the new name of the corporation:	1	
	I A	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation no	or the abbreviation ume must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	
		- (A)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of th	<u>6</u>
Name of New Registered Agent	-	_
(Florida stree	t address)	
New Registered Office Address: NA	, Floric	la(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the	position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	C, (***** OG*	, , , , , , , , , , , , , , , , , , ,					
X Change	<u>PT</u>	John Doe					
X Remove	<u>v</u>	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One) 1) Change	Title P	Name Kenneth L. Boaman	Address 5523 Dubonnet Drive				
Add			Fairfield OH 49014				
2) Change Add Remove							
3) Change Add Remove							
4) Change Add							
Remove Change Add							
Remove 6) Change Add							
Ramove							

Attach additiona	l sheets, if necessary)	(Be specific))			
			IA			
-			· [-/	-		
				·		
			·			
		-				<u>.</u>
						
			<u> </u>			
		<u></u>				
			·			
f an amendmei	nt provides for an ex	change, reclass	sification, or canc	ellation of issued	l shares,	
	implementing the an icable, indicate N/A)	<u>rendment if no</u>	t contained in the	amendment itse	<u>:lf:</u>	
	_				-	
.						
	·	NA		· · ·		
		-		•		<u></u>
	 		**		·	
		.				

The date of each amendment(s) adoption	, if other than to
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	iment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following smust be separately provided for each voting group entitled to vote separately on the amendment(s)	
"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 sha action was not required.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareho action was not required.	lder
Dated8 23 19	
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	-

as t