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Amend TB 4-15-09

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: Pioneer Construction Rooting Inc						
DOCUMENT NUMBER: Po800017378						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
(Name of Contact Person)						
Pioneer Construction Roofing Inc. (Firm/Company)						
1191 pine 5t. (Address)						
DAytona Boh Fla 32119 (City/State and Zip Code)						
For further information concerning this matter, please call:						
(Name of Contact Person) at (386) 760-9400 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee \$\times \\$43.75 Filing Fee \\$\times \\$2.50 Filing Fee \\$\times \\$52.50 Filing Fee \\$\times \\$\ti						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle						

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

Yioneer Constru	<del>-                                    </del>	Rooting	Inc.
(Name of Corporation as curr	ently filed with the	he Florida Dept. of S	tate)
<u> </u>			
(Document Nur	mber of Corporation	on (if known)	
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incor	rporation:	·	t Corporation adopts the
A. If amending name, enter the new name o	f the corporation	<u>!</u>	
The new name must be distinguishable a "incorporated" or the abbreviation "Corp.," "Co". A professional corporation nam association," or the abbreviation "P.A."	"Inc.," or Co.,	" or the designation	"Corp," "Inc," or
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>			PR 13 PH 1: 16 SEURETARY OF SHATE TALLIAHASSEE. FLORIDA
D. If amending the registered agent and/or i	registered office :	address in Florida, er	iter the name of the
new registered agent and/or the new regi			
Name of New Registered Agent:			<del></del>
New Registered Office Address:	(Florid	la street address)	<del></del>
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered position.			ept the obligations of the
	Signature of New	Registered Agent, if ch	nanging

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	James Silvis WIII	1191 pinest. Daytora Bch +1.33119	_
_V_	hester S. Taylor	107 Dolfiest. Opytona Beh 7/a. 32/18	Add Remove
			_ Add _ Remove
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
provisi	nendment provides for an exchange, reons for implementing the amendment if applicable, indicate N/A)		

The date of each amendment(s) adoption: 4-10-2009				
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)				
(no more than 90 days after amendment file date)				
Adoption of Amendment(s) (CHECK ONE)				
The amendment(s) was/were adopted by the shareholders. The number of votes cast for t by the shareholders was/were sufficient for approval.	he amendment(s)			
The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amendment.				
"The number of votes cast for the amendment(s) was/were sufficient for approval				
by"				
(voting group)				
The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	ı and shareholder			
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder			
Dated 4-10-2009				
Signature (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)				
(Typed or printed name of person signing)				
Registered Agent - (Title of person signing)	Sourcefary			