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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: SKY UNE KOOKS 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 Firm/ Company bane Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$35 Filing Fee **□\$**43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

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 Amer	ndment	FILE	1
(Name of Corpor	Articles of Incorp	oofs	17 JUN 29 Ald SECONDATO (ALD DEPLOYSIAN)	111:46 actors Inc
	<u>0800</u>	002	7540)
(Doc	cument Number of Co	orporation (if know	wn)	
Pursuant to the provisions of section 607,1006. Florits Articles of Incorporation:	rida Statutes, this <i>Flo</i>	rida Profit Corpo	pration adopts the fol	llowing amendment(s) to
A. If amending name, enter the new name of the	corporation:			
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co"	". A professiona		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)				
D. If amending the registered agent and/or registered agent and/or the new register		in Florida, enter	the name of the	
Name of New Registered Agent				
	(Florida street e	iddress)		
New Registered Office Address:	(Cit		, Florida	(Zip Code)
New Registered Agent's Signature, if changing Is I hereby accept the appointment as registered agen		and accept the ϕ	bligations of the posi	ition.
Si	ignature of New Regi:		anging	

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	<u>PT</u>	John D	<u>lue</u>			
X Remove	<u>V</u>	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally S	<u>mith</u>			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change	<u> </u>	_	EDDY SOFA	9787	Nw. 106th	. lan
Add Remove						
2) Change		_				
Add						
Remove						-
3) Change						•
Add						
Remove						-
4) Change		_				
Add						•
Remove						-
5) Change		_				
Add				+		
Remove						
6) Change						
Add						
D						

f amending or adding addition Attach additional sheets, if necessity	zssary). (Be specific)			
		<u> </u>		
				
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	,			
	<u> </u>			··········
				
				
f an amendment provides for	an exchange reclassifi	estion or especiation	of issued charge	
provisions for implementing	the amendment if not c	ontained in the amendr	nent itself:	
(if not applicable, indicate	· N/A)			
				

The date of each amendment(s) adoption:	, if other than the
0/ 21/2010	
Effective date if applicable: UO CO CO (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 ame by the shareholders was/were sufficient for approval.	adment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must 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 and shareholder was not required.	archolder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required.	older
Dated <u>06: 76 · 17</u> Signature	
Signature (By a director president or other officer – if directors or officers have n selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	
EDDY SOSA	
(Typed or printed name of person signing)	
Secretary. (fitle of person signing)	
(Title of person signing)	

Eddy Soza 8787 NW 106th Lane Hialeah Gardens Florida 33018

June 27, 2017

Amendment Section
Florida Department of State Divisions of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Dear Amendment Section:

I would like to inform you that I am resigning from my position as Secretary from Skyline Roofs Contractors Inc., effective June 26, 2017.

Please remove me as I no longer am part of Skyline Roofs Contractors Inc.

If I can be of any help during this transition, please let me know.

Sincerely,

Eddy Soza

786-232-2287

Sozaroofing@yahoo.com