P09 0000 27314

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	KATION	RACTING & DEVELOPM	ENT INC	
DOCUMENT NUM	BER: P09000027314			
	of Amendment and fee are si	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	MICHAEL A RIZZO			
	Name of Contact Person			
	Firm/ Company			
	14061 OLD CRYSTAL RIVER RD			
	Address			
	BROOKSVILLE FL 34601			
	City/ State and Zip Code			
	RACHEL@SSCROOFING.	СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, plea-	se call:		
MICHAEL A RIZZO		at (253-1948	
Name	of Contact Person	Area Co	dc & Daytime Telephone Number	
Enclosed is a check for	r 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SCHARP CONTRACTING & DEVELOPMENT INC.

/N	-5 C			2-32
P09000027314	of Corporation as curre	ntly filed with the Floric	la Dept. of State)	
	(Document Numbe	r of Corporation (if know		
	(Bocament Namoc	or corporation (it know	,	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is <i>Florida Profit Corpord</i>	ution adopts the following amo	endment(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,	Corp," "Inc," or "Co".	A professional corpora	The prated or the abbreviation "Contain the align rame must contain the	orp., "
B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>		 		_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) 1). If amending the registered agent and approximately address and approximately address to the post and the registered agent and approximately address to the post and	OFFICE BOX) nd/or registered office ac		he name of the	
new registered agent and/or the ne		<u>'88:</u>		
Name of New Registered Agent	MICHAEL A RIZZO	<u>_</u>		
	14061 OLD CRYSTAL	RIVER RD		
	(Florida	street address)		
New Registered Office Address:	BROOKSVILLE		34601	
New Registered Office Address.		(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Age vered agent. I um familia	nt: r with and accept the obli	gations of the position.	
<u>v</u>	Signature of New	Registered Agent, if chan		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. Tum familia	nt:	gations of the position.	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	MIKE RIZZO LLC	14061 OLD CRYSTAL RIVER RE
Add			BROOKSVILLE FL 34601
X Remove			
2) Change	PT	MICHAEL A RIZZO	14061 OLD CRYSTAL RIVER RU
X Add			BROOKSVILLE FL 34601
Remove 3) Change			
Add			
Remove			
4) Change			
A dd			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

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

. .

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action ar	nd shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap inust be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast by MICHAEL A RIZZO	for the amendment(s) was/were sufficient for approval	
,	(voting group)	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	MICHAEL A RIZZO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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