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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: TK'S SWEE	EPS, INC.	
DOCUMENT NUMBER: P11000102813		
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this matt		•
TIMOTHY MILLE	R	
	Name of Contact Person	
GECKO ROOFIN	G, INC.	
	Firm/ Company	
PO BOX 411		
	Address	
BRONSON, FL 32	2621	
	City/ State and Zip Cod	9
TMILLER@SMREST	<b>ORATIONSVC</b>	S.COM
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, please	call:	•
TIMOTHY MILLER	at (352	, 284-9491
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	ariment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		ment Section n of Corporations
P.O. Box 6327		Building
Tallahassee, FL 32314		xecutive Center Circle
	Taliaha	issee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TK'S SWEEPS, INC.		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P11000102813		10 110 110 110 110 110 110 110 110 110
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation add	opts the following amendment(s)
A. If amending name, enter the new name of the corporation: GECKO ROOFING, INC.		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporat	rated" or the abbreviation
B. Enter new principal office address, if applicable;	4927 SW 41ST E	3LVD
(Principal office address MUST BE A STREET ADDRESS)	SUITE 40	
	GAINESVILLE, F	FL 32608
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 411	
	BRONSON, FL 3	32621
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	dress in Florida, enter the name	of the
(Florida s	ireet address)	
New Registered Office Address:	. Florida	
(Cit)	v)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	<b>it:</b> with and accept the obligations	of the position.  TASE 201
Signature of New Registered	Agent, if changing	FILED  INAY -9 P 4  CRETARY OF ST.  LAHASSEE, FLO

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	DT	I-t- D-	
W Cuanke	PI	<u>John Doe</u>	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>VP</u>	DARRYL WILLIAMS	5350 NE 103RD TERRACE
X Add Remove			BRONSON, FL 32621
<del></del>			
2) Change Add			
Remove			
3) Change			
Add	. <del></del>		
Remove			
4) Change Add	<del></del>		
Remove			
5) Change			
Add		. •	
Remove			
0 01			
5) Change Add			
Add Remove			
TOHOAG		· · · ·	

attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
		·
I an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	

The date of each amendment(s) adoption: 04/12/12		
Effective date if applicable:		
, ———	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	77	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
- 4/20/	J7	
Dated [/30]	1000	
Signature	rusth Meller	
(By a dire	ector, president or other officer - if directors or officers have not been	
	by an incorporator — if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
appointed	indicially by that indicially)	
T	IMOTHY MILLER	
<del></del>	(Typed or printed name of person signing)	
F	PRESIDENT	
	(Title of person signing)	