Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LICENSES ETC INC

Account Number : 120070000159

: (239)777-1028

Phone Fax Number

: (877)275-3593

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Ctc @ Licensesetc.com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN CLINE ROOFING SERVICES, INC

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November 13, 2012

# FLORIDA DEPARTMENT OF STATE Division of Corporations

CLINE ROOTING SERVICES, INC 779 74TH AVENUE NORTH SAINT PETERSBURG, FL 33702

SUBJECT: CLINE ROOFING SERVICES, INC

REF: P12000092520

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

THE DOCUMENT TYPE BEING CORRECTED IS NOT "OFFICER/DIRECTOR DETAIL". CORRECT THE DOCUMENT TO READ: "ARTICLES OF INCORPORATION" BEING THE DOCUMENT BEING CORRECTED SINCE THE OFFICERS AND DIRECTORS WERE IN THE ARTICLES OF INCORPORATION FILED WITH OUR OFFICE ON 11/05/12.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II FAX Aud. #: H12000269893 Letter Number: 212A00027409

RECEIVED
12 NOV 14 AM 8: 09
UNSTANTANT OF STATIONS
MALL A HASSER FLORIDA

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations	٠.	
SUBJECT: CLINE ROOF!	NG SERVICES, INC	
DOCUMENT NUMBER: P1200009	Name of Corporation 2520	
The enclosed Articles of Correction and for	•	
Please return all correspondence concerni	ng this matter to the following:	
Lisa Adams		
Name of Contact Person		
Licenses, Etc.		
886 110th Ave. N. #6	· · · · · · · · · · · · · · · · · · ·	
Naples, FL 34108		
etc@licensesetc.com  B-mail address: (to be used for future annual 1		
For further information concerning this m	÷	
Lisa Adams	at (239) 777-8321  Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amo	ount:	
■ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	
☐ \$43.75 Filing Fee & Certified Copy	S52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

11/12/2012 07:37

7278272187

TOBEY&JASON CLINE

PAGE 81/01

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#### ARTICLES OF CORRECTION

For

### CLINE ROOFING SERVICES, INC

Name of Corporation as comparity filed with the Florida Dens of Sinte-

/ — · — w viny water in the continuity same to	
P12000092520	
Dicument Number (i	(mown)
•	
Pursuant to the provisions of Section 607.0124 or 617. these Articles of Correction within 30 days of the file of	1124, Florida Statutes, this corporation files late of the document being corrected.
These articles of correction correct . Hiticles	OF Incorporation.
filed with the Department of State on 11/05/2012	to of Document)
Specify the inaccuracy, incorrect statement, or defect:	
Tobey Cline and Derek F Cline were bo	oth listed as officers and should
not be listed.	
THUL DE HOLEU.	
	·
· · · · · · · · · · · · · · · · · · ·	The state of the s
Correct the inaccuracy, incorrect statement, or defect:	
Please remove both Tobey and Derek	and leave Jason O Cline as the
only officer for the company.	
Thank you,	
mank you,	
1/1/1	
(Signature of a paregula, president or other office of been selected, by an anisotropistur - if in the other oversportures inductary, by that ficture	er - if directors or officers have liminds of the receiver, truster, or ary.)
Jason O Cline	President
(Typed or primed name of person signing)	(Title of person signing)

Filing Fee: \$35.00

(((H12000269893 3)))