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(Pa	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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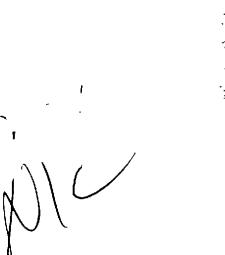




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: DEMPSEY COME	1ERCIAL ROOFING, INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBI	ER:		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	iter to the following:	
ŀ	CENNETH M SIEGEL		
•	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	1
S	HEGEL & COMPANY, CPA	٨	
_		Firm/ Company	
1	14 PALMOLA STREET		
_		Address	
I	AKELAND, FL 33803		
-		City/ State and Zip Code	
KEN@	KSIEGELCPA.COM		V
		sed for future annual report	
For further information KENNETH M SIEGEL	concerning this matter, pleas	at (863	680-1040
Name of	Contact Person		de & Daytime Telephone Number
	the following amount made		•
■ \$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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

s currently filed with the F	lorida Dept. of State)	
P13MMM2	=10	
Number of Corporation (if k	nown)	
tutes, this Florida Profit Con	rporation adopts the following	; amendment(s)
ration:		
	*	The new
corporation," "company," of Inc," or "Co". A profession reviation "P.A."	or "incorporated" or the ab mal corporation name must c	obreviation contain the
		
<u>SS</u>)	- <i>;</i> '	Ö
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		(<u>1</u> }
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office address in Flo <u>rida, er</u>	nter the name of the	
ce address:		
(Florida street address)		
	, Florida	
(City)	(Zip C	Tode)
red Agent: a familiar with and accept th	e obligations of the position.	
e of New Registered Agent, i	f changing	
	Number of Corporation (if kinders, this Florida Profit Contration: Proporation: Proporation: Proporation: Profice address in Florida, enter address: (Florida street address) (City) Pred Agent: I jamiliar with and accept the	orporation," "company," or "incorporated" or the ablac, " or "Co". A professional corporation name must coveriation "P.A." SSS) Office address in Florida, enter the name of the re address: (Florida street address) Florida (City) (Zip C

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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>-</u> <u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u></u>
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	. (Be specific)	
•		
an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions for implementing the amo	nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:, if other date this document was signed.
Effective date if applicable:
(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, this date will not be liste document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"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 action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
CASEY DEMPSEY
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

the

the