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COVER LETTER

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER: P14000	0 21194	<u>.</u>
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
EDDY C SOZAROOF 8787 N.W. Hialeah Gard	, 80ZA	
	Name of Contact Person	1
50ZA ROOF	ing Corp.	
	Firm/ Company	
8787 N.W.	106th loine	
	Address	
Hialenh fact	ens 4. 33	3018
the sen to	City/ State and Zin Code	<u>, </u>
Sold empting A	JAhoo Com used for future annual report	
E-mail address: (to be t	ised for future annual report	notification)
For further information concerning this matter, plea-	ase call:	
For further information concerning this matter, plea	ase call:	
	at ('7-8 6	<u> 232·2287</u>
	at ('7-8 6	232 · 2287 de & Daytime Telephone Number
	at (<u>'7-86</u> Area Co	de de 17aytane retephone (Vanitie)
EDDY C. Sopa Name of Contact Person	at (<u>'7-86</u> Area Co	de de 17aytane retephone (Vanitie)
FDDy C. Sopa Name of Contact Person Enclosed is a check for the following amount made \$\mathbb{Z}\$ \$35 Filing Fee \$\mathbb{L}\$\$	at (17-86 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	urtment of State: \$\insp\\$\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
FDDy C. Sopa Name of Contact Person Enclosed is a check for the following amount made \$\mathbb{\mathbb{Z}}\$ \$35 Filing Fee \text{\text{Certificate of Status}} \text{\text{Mailing Address}}{Amendment Section}	at (17-86 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend	urtment of State: \$\inspec \text{S52.50}\$ Filing Fee \text{Certificate of Status} \text{Certified Copy} \text{(Additional Copy is enclosed)} \$\int \text{Address} \text{ment Section}\$
Name of Contact Person Enclosed is a check for the following amount made \$\mathbb{\mathbb{Z}}\$ \$35 Filing Fee \$\mathbb{L}\$ Certificate of Status \[\textbf{Mailing Address} \\ \text{Amendment Section} \\ \text{Division of Corporations} \]	at (17-86 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend Divisio	rtment of State: \$\Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Left(2009) & (Additional Copy & (Additional Copy & (Address)
Name of Contact Person Enclosed is a check for the following amount made \$\mathbb{\mathbb{Z}}\$ \$35 Filing Fee \$\mathbb{\text{Certificate of Status}}\$ \[\text{Mailing Address} \\ \text{Amendment Section} \\ \text{Division of Corporations} \\ \text{P.O. Box 6327}\$	at (17-86 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend Divisio Clifton	urtment of State: \$\inspec \text{S52.50}\$ Filing Fee \text{Certificate of Status} \text{Certified Copy} \text{(Additional Copy is enclosed)} \$\frac{Address}{Address}\$ ment Section of Corporations \text{Building}
Name of Contact Person Enclosed is a check for the following amount made \$\mathbb{\mathbb{Z}}\$ \$35 Filing Fee \$\mathbb{L}\$ Certificate of Status \[\textbf{Mailing Address} \\ \text{Amendment Section} \\ \text{Division of Corporations} \]	at (17-86 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend Divisio Clifton 2661 E	rtment of State: \$\Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} \Left(2009) & (Additional Copy & (Additional Copy & (Address)

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Articles of Amendment Articles of Incorporation of

Soza Roofing	Carp:	
(Name of Corporation	on as currently filed with the Florida Dept, of State)	
B1400009110		
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following am	iendment(s) to
A. If amending name, enter the new name of the co	orporation:	
	The	, new
	rd "corporation," "company," or "incorporated" or the abbre o," "Inc," or "Co". A professional corporation name must conta	viation
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
		
C. Enter new mailing address, if applicable:		二
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>)	
		<u>್ತ</u>
D. If amending the registered agent and/or register new registered agent and/or the new registered.		on Si
	VALLE HAGI CASS	· 경 호:
Name of New Registered Agent		ñ
	(Florida street address)	
New Registered Office Address:		
	(Ciry) (Zip Code)	,
New Registered Agent's Signature, if changing Reg	gistered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.	
Siene	nature of New Registered Agent, if changing	

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)

L'a amerilar

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.

X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	/ Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	\	Hedre Murez	8787 NW 1064 lane
Add			Haleon Hardens FC
Remove		1	33018.
2) Change	\checkmark	Kelvin Soza	8787 Nw. 106th 1010
Add			Hialanh Gar Jens PC
Remove			33018
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	1		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
		
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f an amondment provides for an evel	lange, reclassification, or cancellation of issued shares,	
provisions for implementing the amo	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 0+14.17	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
Dated	_
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Presi-Int	
(Title of person signing)	_