

P14000021194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

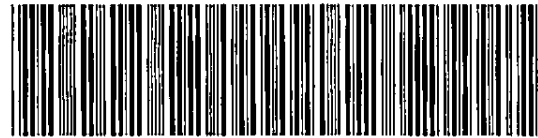
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Amel

SEP 28 2017

11:11:11

SECRETARY OF REVENUE  
TALLAHASSEE, FLORIDA

17 SEP 27 AM 8:00

FILED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SOZA Roofing Corp  
DOCUMENT NUMBER: P14000021194

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDDY SOZA  
Name of Contact Person  
SOZA Roofing Corp  
Firm/ Company  
8787 NW 106<sup>th</sup> Lane  
Address  
Hialeah Gardens, FL 33018  
City/ State and Zip Code  
SOZAroofing@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDDY SOZA at ( 786 ) 232-2287  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

\*can you please assist on processing this request as soon as possible.  
Florida Department of Business and professional Regulation is requesting this  
Amendment asap.  
Thank you for your cooperation.

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 7, 2017

EDDY SOZA  
8787 NW 106TH LN  
HIALEAH GARDENS, FL 33018

SUBJECT: SOZA ROOFING, CORP.  
Ref. Number: P14000021194

We have received your document for SOZA ROOFING, CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 4 is missing from the document and must be completed. Please find enclosed the missing page.

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.

Rebekah White  
Regulatory Specialist II

Letter Number: 517A00018528

RECEIVED  
17 SEP 27 PM 12:13  
DEPARTMENT OF STATE

FILED

Articles of Amendment  
to  
Articles of Incorporation  
of

17 SEP 27 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SOZA Roofing CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

PI40000021194

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature 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)

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:

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☐ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- 1) ☐ Change      C      Ronald Smith      8787 NW 106<sup>th</sup> lane  
☒ Add      \* 20 % Shareholder      Hialeah Gardens FL 33018  
☐ Remove      \_\_\_\_\_
- 2) ☐ Change      \_\_\_\_\_  
☐ Add      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_
- 3) ☐ Change      \_\_\_\_\_  
☐ Add      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_
- 4) ☐ Change      \_\_\_\_\_  
☐ Add      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_
- 5) ☐ Change      \_\_\_\_\_  
☐ Add      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_
- 6) ☐ Change      \_\_\_\_\_  
☐ Add      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_

[illegible]

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: 09.1.2017  
(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 listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ 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 09.01.17

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)

EDDY SOGA  
(Typed or printed name of person signing)

President  
(Title of person signing)