P14000052434

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ac	ldress)	
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MANASSEE FLORIS

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Roman's Cerdafied Construction Inc
DOCUMENT NUMBER: 21900052434
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roman Cerda Name of Contact Person
Roman's Cordafied Construction, Inc.
1956 Filly Road Address
City/State and Zip Code
Cerdafied construction a Outlook Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Roman Cerda at (850) 525-7028 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 Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

Roman's Cerdatied non	struction	100		
(Name of Corporation as currently	filed with the Florid	la Dept. of State)		
P14000052434				
(Document Number of	Corporation (if know	1)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corpore	ntion adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:				
NA		The way		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional o	The snew incorporated" or the abbreviation corporation name must contain the		
B. Enter new principal office address, if applicable:	NA	る。コード		
(Principal office address MUST BE A STREET ADDRESS)				
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA			
 If amending the registered agent and/or registered office address; new registered agent and/or the new registered office address; 		he name of the		
Name of New Registered Agent				
(Florida stree	at address)			
A) (a	er augressy			
New Registered Office Address: N / H	City)	, Florida (Zip Code)		
		·		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obl	igations of the position.		
Signature of New Re	gistered Agent, if cha	nging		

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	PT John l	<u>Doe</u>			
X Remove	V Mike Jones				
X Add	SV Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	Address		
1) Change	<u>D</u>	Jonathan Moses	5684 Nicholas		
Add Remove			Pensacola Fl 32526		
2) Change	\mathcal{D}	Todd Williams	130 Karen Circle Pensacola FI		
Remove 3) Change	D	Shaun Gunsley	32514 7333 Pine forest Rd Pensacola, Fl.		
Remove			32526		
4) Change					
Remove					
5) Change					
Remove					
6) Change					
Add					
w emouve					

	ng or adding addition ditional sheets, if nece					
			·			
						·
rovisio	ndment provides for ns for implementing t ot applicable, indicate	he amendment if n	ssification, or can ot contained in th	cellation of issued e amendment itsel	shares, <u>f:</u>	
		·			····	
				<u></u>		-
						
						
						
						
	<u>.</u>					<u> </u>

The date of each amendment(s) adoption: date this document was signed.		15	16	, if other than th
Effective date <u>if applicable</u> :	(no more ti	han 90 days	after amendm	ent file date)
Note: If the date inserted in this block does r document's effective date on the Department of			tatutory filing	requirements, this date will not be listed as th
Adoption of Amendment(s) (CF	IECK ONE)			
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		. The numb	er of votes cas	for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the ame	ndment(s) wa	s/were suffi	cient for appro	val
by	ting group)			
☐ The amendment(s) was/were adopted by the action was not required.	board of dire	ectors witho	ut shareholder	action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporator	s without sh	areholder actio	n and shareholder
Dated 15	10		1 . 0	
Signature	na_		hul	
	orporator - if	in the hand		ficers have not been trustee, or other court
	(Typed or pri	Th	of person signin	10)
	(a ypea or pri		or berson signi	*5)
		Title of per	son signing)	