P1500000 7918

| (Requestor's Name) | |
|---|---------|
| (Address) | 40034 |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | 06/02/2 |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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Office Use Only



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Amend

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COVER LETTER

FO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: SUN CONSTRUC | TION AND ROOFING IN | · · · · · · · · · · · · · · · · · · · |
|-------------------------|--|---|--|
| | BER: P15000007918 | | |
| | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | JOSUE DUVERNA | | |
| | | Name of Contact Persor | 1 |
| | SUN CONTRUCTION AND | ROOFING | |
| | | Firm/ Company | · · · · · · · · · · · · · · · · · · · |
| | 1440 CORAL RIDGE DR ST | | |
| | | Address | |
| | CORAL SPRINGS FL 33071 | | |
| | | City/ State and Zip Code | 2 |
| | JDUVERNA/g GMAIL.COM | I | |
| | E-mail address: (to be us | ed for future annual report | notification) |
| For further informatic | on concerning this matter, pleas | se call; | |
| JOSUE DUVERNA | | at (<u>954</u> | 461-1348 |
| Name | of Contact Person | Area Coo | Je & Daytime Telephone Number |
| Enclosed is a check to | or the following amount made [| payable to the Florida Depa | artment 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) |
| Am Div P,O | iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314 | Amend Divisio The Co 2415 N | Address ment Section n of Corporations entre of Tallahassee 8. Monroe Street, Suite 810 ssee, FL 32303 |

Articles of Amendment to Articles of Incorporation

| SUN CONSTRUCTION AND ROOFING INC | | | | |
|---|---|-------------|--|------------|
| (Name of Corporation as currently P15000007918 | r filed with the Florida Dept, of State | <u>;</u>) | | |
| | Corporation (it known) | | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation: | Florida Profit Corporation adopts the | following | amendi | ment(s) to |
| A. If amending name, enter the new name of the corporation: | | | | |
| name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the ab professional corporation name mus | breviation | The new The The Teach The The The The The The The The The Th | |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | | | - |
| | | | | - |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | - <u>1</u> | 2020 يا | ٠. من |
| | | | -2 | |
| D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address: | | | RH 8: 45 | T |
| Name of New Registered Agent | | | . F2 | |
| eFlorida stre | vt address) | | | |
| New Registered Office Address: | Ciry) . Florida_ | | | _ |
| , | City) | (Zip Ce | ute) | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w | ith and accept the obligations of the po | ositiou. | | |
| | | | | |
| | gistered Agent, if changing | | | |
| Signature of New Re | gistered Agent, if changing | | | |

Check if applicable

U The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

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 fitle 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> | <u>John D</u> | <u>oe</u> | |
|-------------------------------|------------------|---------------|-----------------|------------------------|
| X Remove | <u>V</u> | Mike J | ones | |
| _X Add | \underline{SV} | Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | | Name | <u>Addres</u> s |
| 1) Change | VP | _ | VANESSA DUVERNA | 874 NW 126 DR |
| X Add | | | | CORAL SPRINGS FL 33071 |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| H an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/4) | |
|---|---------------|
| provisions for implementing the amendment if not contained in the amendment itself: | |
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| (if not applicable, indicate NA) | |
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| | 05/29/2020 | | |
|--|---|--|--------|
| The date of each amendment(s) ado date this document was signed. | ption: | if other th | an the |
| Effective date if applicable: | | | |
| - | tuo more than 90 days | after amendment file date) | |
| Note: If the date inserted in this bloc document's effective date on the Depa | ck does not meet the applicable strument of State's records. | statutory filing requirements, this date will not be listed | as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| ■ The amendment(s) was/were adopt action was not required. | ed by the incorporators, or board o | of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were adopt by the shareholders was/were suffi | | per of votes cast for the amendment(s) | |
| ☐ The amendment(s) was/were appro- must be separately provided for ea | | voting groups. The following statement parately on the amendment(s): | |
| "The number of votes cast fo | the amendment(s) was/were suff | icient for approval | |
| hv | | . | |
| selected. I appointed | ny anjincorporator – if in the hands fiduciary by that fiduciary) SUE DUVERNA | directors or officers have not been s of a receiver, trustee, or other court | |
| , | (Typed or printed name of | of person signing) | |
| | (Title of person signing) | | |