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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Keller Roofing & Inspections Co
DOCUMENT NUMBER: P15000027675
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PA + Ricia Anderson Name of Contact Person
Keller Roofing & Inspections Co
8540 W St Rd 84
PAVIE 4 33324 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PATRICIA A Anderson at (954) 5129476 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 Certified Copy (Additional copy is enclosed) 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

Tailahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Keller Roofing & Inspec	tions Co 15 JUN 26 PM 3:06
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P 15 0000 27 675	TALLAMASCIE, FLUIDA
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Valles Rosfier And Inspection	Das Co. The now
Keller Roofing And Inspection name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	8540 West St Rd 84 # B
	DAVIE, Fl 33324
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u></u>
	8540 West St Rd 84 # B
	DAVIE, F1 33324
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent	
(Florida :	street address)
	,
New Registered Office Address:	, Florida (City) (Zip Code)
N- Design 14 and Class - 14 Test - Design 14 and A	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	AL: r 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 <math>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 Doc	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	76	Fredrick James	5042 SW 92 Are
Add Remove			Cooper City F1 33321
2) Change	·		
Add			
Remove		•	
3) Change	•		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damova			

ch additional sheets, if necessary). (Be specific)	
NA	
n amendment provides for an exchange, reclassification, or convisions for implementing the amendment if not contained in (if not applicable, indicate N/A)	ancellation of issued shares, the amendment itself:
NA	
•	

The date of each amendment(s) adoption:	6/15/15	if other than the
late this document was signed.		
Effective date <u>if applicable</u> :	6 15 15 more than 90 days after amendment file date)	
(no)	more inan 90 aays after amenament file aate)	
Note: If the date inserted in this block does not med document's effective date on the Department of State's		s, this date will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv		endment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group		
"The number of votes cast for the amendmen	t(s) was/were sufficient for approval	·
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(voting gr	oup)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and sl	hareholder
The amendment(s) was/were adopted by the incorpaction was not required.	orators without shareholder action and sharel	holder
Dated C /15/15	a anduson	
Signature Policia	a anduson	
(By a director, president of	or other officer – if directors or officers have:	
selected, by an incorpora appointed fiduciary by the	tor – if in the hands of a receiver, trustee, or c at fiduciary)	other court
PATRICIA	A Anderson d or printed name of person signing) Adent (Title of person signing)	
(Туре	d or printed name of person signing)	
PResi	dent	
,	(Title of person signing)	