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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	rion: FRC RENOVATION	ON SERVICES OF FLORIDA CORP.				
DOCUMENT NUMBER	R: P15000087003					
	Amendment and fee are su	bmitted for filing.				
Please return all correspon	ndence concerning this made	tter to the following:				
		FERNANDO CRUZ				
	Name of Contact Person					
_						
	Firm/ Company					
	7621 BRIGHTWATER PLACE					
	Address					
	OVIEDO, FLORIDA 32765					
		City/ State and Zip Code				
		FRCROOF@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report notification)				
For further information co	ncerning this matter, pleas	se call:				
FERNANDO CRUZ		at (407 347, 3654				
Name of C	ontact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the	e following amount made p	payable to the Florida Department of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Amendr Divisior P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of

FRC RENOVATION SERVICES OF FLORIDA CORP

(Name of Corporation as o	currently filed with the Florida Dept. of State)
P15000087003	
(Document No	umber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the corporat	<u>ition:</u>
ERRITAGE ROOFING SERVICES CORP.	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office and/or the new registered office and/or t	
Name of New Registered Agent	
(Fl	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered agent. I am fa	<u>d Agent:</u> amiliar with and accept the obligations of the position.
Signature o	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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			10.500
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
			-
5) Change		7/2 PAIL & LANCE CO. 10.	
Add			
Remove			
6) Change			
Add			
Remove			

diamonal sheets, y necessary).	(Be specific)
	
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an analysis of the samendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

•	03/09/2016	
The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	03/09/2016	
енесиче часе <u>и аррисавие</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendme ere sufficient for approval.	nt(s)
	re approved by the shareholders through voting groups. The following state of for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	•
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	lder
action was not required.	e adopted by the incorporators without shareholder action and shareholder	
03/09 Dated	/2016	
Signature	(1)4-	
(B	y a director, president or other officer - if directors or officers have not be	en
	ected by an incorporator - if in the hands of a receiver, trustee, or other co	ourt
ap	pointed fiduciary by that fiduciary)	
	Fernando Cruz	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	