P16000059361

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COVER LETTER

TO: Amendment Section Division of Corporations

TOVAR ROOFIN NAME OF CORPORATION:	IG INC
P16000059361	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and ee are s	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
FERNANDO TOVAR	
	(Name of Contact Person)
TOVAR EQUIPMENT RENTAL INC	
	(Firm/ Company)
1022 NORTH F STREET	(Add)
	(Address)
LAKE: WORTH FL 33460	
	(City/ State and Zip Code)
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	era celle
ror turner information concerning this matter, plea	ise can.
561-512-7378	at
561-512-7378 (Name of Contact Pers	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee	& \$\subseteq\$\$\$43.75 Filing Fee & \$\subseteq\$\$\$Certified Copy (Additional copy is enclosed) \$\subseteq\$\$\$Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

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

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

Articles of Amendment to Articles of Incorporation of

to

TOVAR ROOFING INC		·	
(Name of Corporatio	n as currently filed with the Flori	da Dept. of State)	
P16000059361			
(Docume	ent Number of Corporation (if know	/n)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpor	ration adopts the fol	lowing amendment(s)
A. If amending name, enter the new name of the cor	rporation:		
TOVAR EQUIPMENT RENTAL INC			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co". A professional		the abbreviation
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDI</u>	<u>RESS</u>)		W. 6
			<u> </u>
C. Enter new mailing address, if applicable:			SSA J
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>		THE TO
			S 10
	 		河流 ~
			<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
Test to the test t	(City)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		ligations of the nos	ition
And they weekly the appointment as regulered agent. I	am jammar min and accept the oo	nganons of the post	
· · · · · · · · · · · · · · · · · · ·			
Signa	ture of New Registered Agent, if cha	anging	

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1)Change				
Add				
Remove				
2) Change	·-···			
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Channe				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove			ı	

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
(Attach additional sheets, if necessary).	(Be specific)	
•		
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	nument if not contained in the amendment usen.	
•		
	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a date this document was signed.	doption:		, if other than the
Effective date if applicable:			
	(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D		eet the applicable statutory filing requirements, this date e's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK	CONE)	
☐ The amendment(s) was/were ad by the shareholders was/were se		cholders. The number of votes cast for the amendment(s) aval.	
		reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):	
"The number of votes case	for the amendmen	nt(s) was/were sufficient for approval	
by		"	
	(voting g	group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board	d of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incor	porators without shareholder action and shareholder	
07/29/2010 Dated	6		
Signotype	Euron L	Couw	
Signature(By a c	director, president	or other officer - if directors or officers have not been	
selecte	ed, by an incorpora ited fiduciary by the	ator + if in the hands of a receiver, trustee, or other court	
	FERNANDO TO	OVAR	
	(Type	ed or printed name of person signing)	
	PRESIDENT		
		(Title of person signing)	