P16000073084

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S. PRATHER

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: H MAC ROOTING INC DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Melinda Hegarty
Name of Contact Person H MAC ROOFING INC PO BOX 29/358
Address Tampa, Horida 33687 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>813</u>) <u>986-4968</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□**\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

H Mae Roofing Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000073084

its Articles of Incorporation:			
A. If amending name, enter the new name of the corporation:			
			The new
name must he distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "C word "chartered," "professional association," or the abbreviation "I	"o". A professional corp	rporated" or the coration name must	abbreviation contain the
B. Enter new principal office address, if applicable:		2.5	ک
(Principal office address MUST BE A STREET ADDRESS)		, m F	
		20 20 10 10 10	<u>ာ</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Po Box 29	<u> 1358</u>	4: 0
	Po Box 29 Tampa, Fl.	33687	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the t	name of the	
Name of New Registered Agent			_
(Florida stre	et address)		
(Florida stre	et address)	, Florida	
(Florida stre New Registered Office Address:	et address) City)	, Florida(Ziq	Code)

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	V	Mike Jones					
X Add	<u>sv</u>	Sally Sm	i <u>th</u>				
Type of Action (Check One)	<u>Title</u>	į	Name			<u>Address</u>	
1) Change	VP	. <u>. </u>	James	Michael	(osto	<u>n</u>	
X Add							
Remove							
2) Change							
Add							
Remove							
3) Change							
Add							
Remove							
4) Change					_		
Add							
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

	(Be specific)
	<u></u>
	<u> </u>
	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
ду пол арупсате, такиет голу	
ду пострупските, пинеше 1914)	
ду пол арупсане, такие гол	
ду погарунскоге, пансис 1914)	
ду пол арупсане, такие год	
ун пос аррисших, пансих 1914)	
ду пол арупсане, такие 1914)	
ду пог арупсане, пасие 1914)	
ду пол аррисане, выше год	
ду пол аррисанс, вышис год	
ду пол аррисанс, вышис год	
ду пос аррисших, пансих год	
ду пол аррисших, пансил год	
ду посмеренение, выше год	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	17
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	EM 4: 07
Dated 6 27 17	. J
Signature Melenda Hegarty	
(By a director, president or other officer – it directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Melinda Hegarty (Typed or printed name of person signing)	
President	
(Fitle of nerson signing)	