

P16 0000 99360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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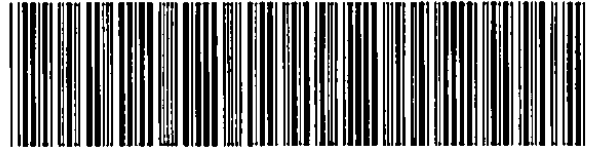
(Business Entity Name)

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ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:

Roofing Associates Inc

DOCUMENT NUMBER:

P16000099 360

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Denault

Name of Contact Person

Roofing Associates Inc

Firm/ Company

2750 Taylor Ave. Ste. A-27

Address

Orlando, FL. 32806

City/ State and Zip Code

admin@nokconstruction.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Denault

Name of Contact Person

at

407, 800-2464

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 &
Certificate of Status

☐ \$43.75 Filing Fee &
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enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
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is enclosed)

CK# 1297

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

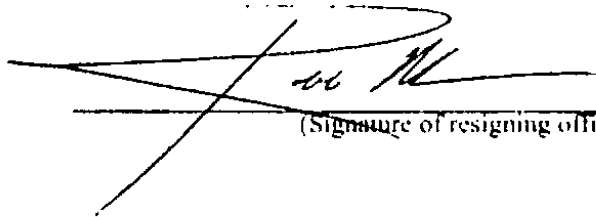
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Robert Marsch, hereby resign as President
(Title)

of Roofing Associates, Inc.
(Name of Corporation)

P16000099360, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314