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## COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTH FLORIDA PRESTIGE SERVICES CORP.

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June 25, 2021

FLORIDA DEPARTMENT OF STATE

SOUTH FLORIDA PRESTIGE SERVICES CORP.

13982 SW 160TH TER MIAMI, FL 33177

SUBJECT: SOUTH FLORIDA PRESTIGE SERVICES CORP.

REF: P17000004990

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P05000147162.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacy Prather Regulatory Specialist III FAX Aud. #: H21000248421 Letter Number: 921A00014546

•			□ ~
5	Articles of Amendment to		2021 JUN 29 TALLAHASS
	Articles of Inco	orporation	三 芸 三
	of		99
SOUTH FLOR	DA PRESTIGE SERVICES CORP.		The section
(Name of Corporation as currently filed with t		filed with the Florida Dept, of State)	70
P17000004990			
	(Document Number of	Corporation (if known)	क्रिक ळ
Pursuant to the its Articles of I	provisions of section 607.1006, Florida Statutes, this Accorporation:	Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amendin	name, enter the new name of the corporation:		
G'S ROOFING	SOLUTIONS CORP		The new
"Inc.," or Co.	stinguishable and contain the word "corporation," "c." or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbrevio professional corporation name must con-	ation "Corp"
B. Enter new	principal office address, if applicable;	9725 SW 146 CT	
	e address MUST BE A STREET ADDRESS )	MIAMI FL 33186	
		<del></del>	<u> </u>
C. Enter new (Mailing ad	mailing address, if applicable: dress <u>MAY BE A POST OFFICE BOX</u> )	9725 SW 146 CT	
		MIAMI FL 33186	
D. If amending	the registered agent and/or registered office address: red agent and/or the new registered office address:	ess in Florida, enter the name of the	
Name :	of New Registered Agent		_
	(Florida stree	et address)	<del></del>
New D.	sistered Office Address:	T1	
1454 16		, Florida City) (Zi	p Code)
New Registered I hereby accept	Agent's Signature, if changing Registered Agent: the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position	1
	Signature of New Res	gistered Agent, if changing	_
OI 14 1			
Check if applic  The amendm	hble ent(s) is/are being filed pursuant to s. 607.0120 (11) (e	e), F.S.	

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 Icaves 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.

X Change	<u>PT</u>	John Do	<b>×</b>	
X Remove	Y	Mike Jo	ones .	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Remove		_		
Add				
Remove				
4) Change		_	<del></del> _	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach <i>ada</i>	proradding additional Articles, enter change(s) here:  stional sheets, if necessary). (Be specific)
·	
An amen	dment provides for an exchange, reclassification, or cancellation of issued shares,  for implementing the amendment if not contained in the amendment itself:
(if not	applicable, indicate N/A)
<u>-</u>	
	I and the second

The date of each	amendment(s) adoption:	, if oth	er than	the
date this documer	nt was signed.	, ,, ,,		-11.0
Effective date if	applicable:			
	(no more than 90 days after amendment file date)			
Note: If the date document's effect	inserted in this block does not meet the applicable statutory filing requirements, this date will tive date on the Department of State's records.	l not be li	sted as	the
Adoption of Ame	endment(s) (CHECK ONE)			
The amendment	nt(s) was/were adopted by the incorporators, or board of directors without shareholder action and required.	sharehold	ler	
The amendment by the shareholder	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.			
☐ The amendmen	at(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s):	Z.L.	2021	
i	nber of votes cast for the amendment(s) was/were sufficient for approval	FALLAHASS	2021 JUN 29	<u>·</u> 1
by	(voting group)	ία. -	62	, <del>-</del>
	(vorma group)			۱۲. زا
	06/29/2021	<b>©</b> ∵	Ġ	
	Dated	<u> </u>	S	
	Signature Jak	· •	ထ	
	(By a director, president or other officer – if 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)	_		
	GABREIL SANTOS			
	(Typed or printed name of person signing)		-	
	PRESIDENT			
	(Title of person signing)	<del></del>	-	