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SEGRETARY OF STATE
DIVISION OF CORPORATIONS

Name Chang

JUL 0 5 2017 D CUSHING

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** hoeniix Roofing NAME OF CORPORATION:  $\underline{Y}$ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person 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 (Additional Copy enclosed)

**Mailing Address** 

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

Street Address

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

is enclosed)

## Articles of Amendment to Articles of Incorporation of

Mooning South	All filed with the Floride Dank of State				
P17000020742	tly filed with the Florida Dept. of State)				
	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
Vital Roofing INC.	The new				
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	320 NE 36+45 St				
	Oakland Park FL 33334				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	320 NE 36th St				
	Oakland Privk Fl 333347				
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address					
Name of New Registered AgentN	99 AT				
, ,	က် ကို				
(Florida street address)					
New Registered Office Address: \(\int\) \(\int\)	, Florida				
	(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar					
NC					
Signature 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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1)Change		NA	
Add			<del> </del>
Remove			
2) Change			
Add			
Remove			•
3) Change		NA	
Add		,	
Remove			
4) Change		_ N/A	
Add		• '	
Remove			<del> </del>
5) Change		NA	
Add			
Remove			
6) Change		NA	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
	NIA			
•				
. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,			
provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:			
· · · · · · · · · · · · · · · · · · ·	NIA			

The date of each amendment(s) adoption:date this document was signed.	NIA	, if other than the
Effective date <u>if applicable</u> :	no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block does not document's effective date on the Department of Sta		irements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for app		the amendment(s)
☐ The amendment(s) was/were approved by the sl must be separately provided for each voting gr		
"The number of votes cast for the amendn	nent(s) was/were sufficient for approval	
by(voting	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(voting	g group)	
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were adopted by the inc action was not required.	orporators without shareholder action and	l shareholder
Dated 615/17	<del></del>	
Signature (Runding Hills)		
(by a unecupi, preside	iii of other officer – if difectors of officer	
	orator – if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by	(that fiduciary)	
\ \	- Z. 1010	
(Ty	ped or printed name of person signing)	
Pre	Sident (Title of person signing)	
	(Title of person cianing)	