Pnoco	74651
(Requestor's Name) (Address) (Address)	700412587687
(City/State/Zip/Phone #)	07/31/2301034002 <b>**</b> 70.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED 2023 JUL 31 PH 2: 12 ALLAHASSEE, FLORID
Office Use Only	

		<u>COVER LETTER</u>			
TO: Amendment Section * Division of Corporations	·. · ·		S. S.		
NAME OF CORPORATION	APEX	ROOFING 0074651	A REVI	10 DELING	INC
DOCUMENT NUMBER:	P1700	00 74651			
The enclosed Articles of Amen	<i>dment</i> and fee are sub	omitted for filing.			
Please return all correspondence	e concerning this mat	tter to the following:			
		DONNA Name of Contact Pers	OTAN on		
	31	Firm/Company SNEVINS	a		
	Ý	Address NEMUTT City/ State and Zip Co	IMANO	FL 329	53
E-1 For further information concer		se call:	YAPOX ort_notification)	- Com	
		at (	) Code & Daytime Te	Lunhona Numbar	
Name of Conta				rephone Number	
Enclosed is a check for the fol	lowing amount made	payable to the Florida De	epartment of State:		
	543.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	: □\$52.50 Filin Certificate of Certified Cop (Additional 0 is enclosed)	f Status py Copy	
<u>Mailing Ad</u> Amendment Division of 0 P.O. Box 63 Tallahassee.	Section Corporations 27	Ame Divi: The 241:	et Address indment Section sion of Corporation Centre of Tallaha 5 N. Monroe Stree ahassee, FL 32303	ssee	

۰.

•

· ·

Articles of Amer	ndment
to Articles of Incorp	poration
	& Remodeling INC
(Name of Corporation as currently fi PI7000074(051	led with the Piorida Dept. of State)
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> ts Articles of Incorporation:	prida Profit Corporation adopts the following amen
A. If amending name, enter the new name of the corporation: COVILLA ROOFING I FAC	The
name must be distinguishable and contain the word "Forporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	ipany," or "incorporated" or the abbreviation "Co rofessional corporation name must contain the v
B. Enter new principal office address, if applicable:	38 NEVINS CI
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MERRITT ISLANK
	FL 32953
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	SAME-
D. If amending the registered agent and/or registered office addres new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street	address)
<u>New Registered Office Address</u> :(C	ity) (Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam familiar wit	h and accept the obligations of the position.
т петену иссергине ирроннитени из тедізлетей идени т ит запинит жи	
	. : : · · · ·

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 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.

Mike Jones, F as Remote	, and su		
Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change			. <u> </u>
Add			
Remove			
2) Change			
Add			
Remove			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
51 Change			·····
Add			
Remove			
6) Change			
Add			
Remove			<u> </u>

(Attach additional sheets, if necessary). (Be specific) \_ \_ \_ .\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ ----\_\_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ ..... F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) \_\_\_\_ \_\_\_\_\_

## E. If amending or adding additional Articles, enter change(s) here:

.

· ·

.

,

The date of each amendment(s) adoption: date this document was signed.

Effective date if applicable:

•

(no more than 99 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

## Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

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 cast for the amendment(s) was/were sufficient for approval

y	······································
	(voting group)
	Dated 7 31 2023 Signature (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)
	DONNA DEM
	(Typed or printed name of person signing)
	OWNER
	(Title of person signing)