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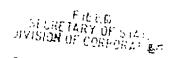


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COVER LETTER



2818 JUL -9 AM 11: 46

TO: Amendment Section Division of Corporations

ATC ROOFING and WATER PROOFING.
NAME OF CORPORATION: ATC ROOFING 2ND WATER PROOFING, ADDITION OF THE P
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
EOGAR GONZalez
EDGAR GONZALEZ Name of Contact Person ATC ROOFING and WATERIROFING, INC
1723 N. STATE ROAD 7
Address MANGATE, E. 33663 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FOGHR GONZAICZ at 954, 656-8865 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
0

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, F1. 32301

Articles of Amendment

to Articles of Incorporation

ATC 8	Roofing	ANO W,	ATER.	PRODFI	NG,	/N
	(Name of Co	orporation as curre <u>ntly</u>	file <u>d with the Flo</u>	orida Dept. of State)	
Ĩ	P17000	0870	34			
		(Document Number of		own)	· _	
Pursuant to the provisits Articles of Incorpo	sions of section 607.1006 oration:	6. Florida Statutes, this F	Florida Profit Corp	poration adopts the f	ollowing amendr	nent(s) to
A. If amending nam	ie, enter the new name	of the corporation:				
					The ne	? \ \'
"Corp.," "Inc.," or	iguishable and contain Co.," or the designation professional association.	i "Corp," "Inc." or "C	Co". A profession	r "incorporated" of al corporation name	r the abbreviatie e must contain ti	m he
	ipal office address, if ap tress <u>MUST BE A STRE</u>					
						
	ing address, if applicable			.	2818 J	31.08C
(Muning duaress	MAT DE ATOST OFF	ICI, BOX)				OF CC
					5	200 P
D. If amending the new registered a	registered agent and/or gent and/or the new re	registered office address:	ess in Florida, ent	er the name of the	=	
Name of Ne	w_Registered Agent					-
		(Florida stre	et address)			
New Registe	red Office Ad <u>dress</u> :			, Florida_		_
			(City)	-	(Zip Code)	
New Registered Age I hereby accept the a	ent's Signature, if chans ppointment as registered	zing Registered Agent: agent. I am familiar w	vith and accept the	obligations of the po	osition.	
			· · · · · · · · · · · · · · · · · · ·			
		Signature of New Re	egistered 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 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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
_X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ABRAHAM HERNANDI	Nort Fort Myers
X_ ∧dd			Nort Fort Myers
Remove			FL. 33903
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
	-	
<u> </u>		
		
<u> </u>		
-		_
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
		_

The date of each amendment(s) adoption:	JULY	6,	2018	, if other than the
date this document was signed. Effective date if applicable:	JULY (PH	2018	
	(no more than 90)	days after am	endment file date)	
Note: If the date inserted in this block document's effective date on the Department		ble statutory f	iling requirements, thi	is date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)			
The amendment(s) was/were adopted by by the shareholders was/were sufficient f		number of vote	es east for the amendm	ent(s)
☐ The amendment(s) was/were approved by must be separately provided for each vot				
"The number of votes cast for the ar	mendment(s) was/were	sufficient for	approval	
by	(voting group)		•••	
ŧ	(voting group)			
☐ The amendment(s) was/were adopted by action was not required.	the board of directors w	rithout shareho	older action and shareh	iolder
The amendment(s) was/were adopted by action was not required.	the incorporators withou	ut shareholder	action and shareholde	r
Dated 07/06	12018			
Signature	2			
- thy a director. I	oresident or other officer			
	incorporator – if in the l iary by that fiduciary)	hands of a rec	eiver, trustee, or other	court
• •	OGAR J	Go	NZAleZ	_
	(Typed or printed na	ime of person	signing)	, =-, -1=
	PRESI			

(Title of person signing)