Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000089825 3)))



H190000698253ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6380

From:

Account Name

: CLARA GIRALDO, P.A.

Account Number : I19998000017

: (305)485-9300

Fax Number

: (305)485-1098

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE STAR ROOF CORP.

Certificate of Status	0
Certified Copy	0
Page Count	05
Fistimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33155 PH.: (305) 485-9300

Blue Star ROOF Corp	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P180000 19116	
(Document Number of Corporation (if known)	 -
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amenits Articles of Incorporation:	dment(s) to
A. If amending name, enter the new name of the corporation:	
guzman Blue Star Mare.	
name must be distinguishable and contain the word "corporation," "company," for "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	new tion the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	28 18 K.
C. Enter new mailing address, if applicable:	- 15 - 18
(Mailing address MAY BE A POST OFFICE BOX)	- 12
D. If anwending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	_
Name of New Registered Avent	
(Florida street address)	
New Registered Office Address:	
(City) , Florida (Zip Code)	-
(- , -, -, -, -, -, -, -, -, -, -, -, -, -,	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the obligations of the position. The temperature $f(x) = f(x)$ is the position of the position.	
Signature of New Registered Agent, if changing	

Page 1 of 4

·....

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 = Treusurer; 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 euch office held. President, Treusurer, 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2)Change		·	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Page 2 of 4

CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33156

Attach additional sheet	s, if necessary).	icles, enter change (Bo specific)	741 3251 A		
					
					
			-		
				•	
				·	
					* * * * * * * * * * * * * * * * * * * *
				· · · · · · · · · · · · · · · · · · ·	
					-
					
		<u> </u>			
In amundment amusic	A				
in amendment provided	umen un anten	<u>inge, reclassification</u> dment if not conta	<u>оп, от сяпсеllation</u> uned in the anyone	of issued shares,	
(if not applicable, is	idicase N/A)			THE TESTINE	
		NIA			
		-//-/			
<u> </u>					

			 ,		
				-	

Page 3 of 4

CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33155 PH.: (305) 485-9300

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenanem file time)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 63-19-18	
Signature	
(Bucin effector, 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)	
Bamon Fernanda Guzman 1	1010
(Typed or printed name of person signing)	10/02
V 1 t	
Tresident	
(Title of person signing)	

Page 4 of 4

CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33155 PH.: (305) 485-9300