P19000016958

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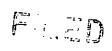
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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Florida Gulf Coas	t Roofing, Inc.		
DOCUMENT NUMI				
	of Amendment and fee are si	abmitted for fili	1g.	
Please return all corres	spondence concerning this ma	atter to the follow	wing:	
	Gabriela Rea			
		Name of Co	ntact Perso	n
	Florida Gulf Coast Roofing.	lne.		
		. <u>.</u>	ompany	
	119 Paddock St.		opany	
		Ado	ress	
	Lehigh Acres, FL 33974			
		City/ State a	nd Zip Cod	e
office	@floridagulfcoastroofing.com	מי		
	E-mail address: (to be u		nual report	notification)
For further information Gabriela Rea	n concerning this matter, plea		27/1	242 7701
	£/7 D	at (_	239	_) 243-7381 de & Daytime Telephone Number
Name c	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the F	lorida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fili Certified C (Additional enclosed)	opy	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of



	- 1974年による
	2019 APR = 1. PM. 4: 12 urrently filed with the Florida Dept. of State)
219000016958	Military of the second
(Document Nu	mber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corporat	ion:
	The new
ome must be distinguishable and contain the word "corp Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. ord "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	119 Paddock St.
Principal office address MUST BE A STREET ADDRESS	Lehigh Acres, FL 33971
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	ce address in Florida, enter the name of the ddress:
If amending the registered agent and/or registered offic	ce address in Florida, enter the name of the ddress:
If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, enter the name of the ddress:
If amending the registered agent and/or registered office new registered agent and/or the new registered office a Name of New Registered Agent	rida street address)
If amending the registered agent and/or registered office new registered agent and/or the new registered office a Name of New Registered Agent	ddress:

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Barbara Kesler	518 98th Ave N.
X Add			Naples, FL 34108
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	cessary). (Be specif	change(s) here:			
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an amendment provides for	an exchange, reclas	sification, or cand	ellation of issued	shares,	
an amendment provides for rovisions for implementing (if not applicable, indicate	the amendment if no	sification, or cand it contained in the	ellation of issued amendment itsel	shares, f:	
rovisions for implementing	the amendment if no	sification, or cand of contained in the	ellation of issued amendment itsel	shares, f <u>:</u>	
rovisions for implementing	the amendment if no	sification, or cand ot contained in the	ellation of issued amendment itsel	shares, f:	-1-
rovisions for implementing	the amendment if no	sification, or cand	ellation of issued amendment itsel	shares, f:	-1-
rovisions for implementing	the amendment if no	sification, or cand	ellation of issued amendment itsel	shares, f:	
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rovisions for implementing	the amendment if no	sification, or cand	ellation of issued amendment itsel	shares, f:	
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an amendment provides for rovisions for implementing (if not applicable, indicate	the amendment if no	sification, or cand	ellation of issued amendment itsel	shares,	
ravisions for implementing	the amendment if no	sification, or cano	ellation of issued	shares,	

	3/27/19	
The date of each amendment(s) adoption: date this document was signed.		, if other than the
03/27/19		
Effective date <u>if applicable</u> :	(no more than 90 days after amo	endment file date)
Note: If the date inserted in this block does a document's effective date on the Department of		iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of vote approval.	es cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	ndment(s) was/were sufficient for a	approval
by	oting group)	
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without sharche	older action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder	action and shareholder
Dated 3/27/19	<u> </u>	
Signature	THU .	
(By a director, pres	sident or other officer - If directors	
	corporator – if in the hands of a reco	eiver, trustee, or other court
appointed fiduciar	ry by that fiduciary)	
	Gabriela Rea	
	(Typed or printed name of person	signing)
	President	
	(Title of person signin	g)

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