

Division of Corporations
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(((H19000285373 3)))



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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : SERVICELL WIRELESS REPAIR CENTER, CORP.
Account Number : I20160000091
Phone : (305)635-9694
Fax Number : (305)635-9868

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

Email Address: jjserviger@yahoo.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
ROKY CONSTRUCTION CORP

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Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 SEP 24 AM 9:38

SEP

7.1.1

Articles of Amendment
to
Articles of Incorporation
of

H190002853

Roky Construction Corp

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000071652

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviations "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending 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 Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

2019 SEP 24 PM 2:30
CLERK OF STATE
TALLAHASSEE, FLORIDA

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed ; 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Joe Florez Chamor</u>	<u>17410 NW 40</u> <u>Miami FL 331</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Jorge Luis Villalobos</u>	<u>17410 NW 40</u> <u>Miami FL 331</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

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H190002;

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

09/23/2019

Effective date if applicable: _____

09/23/2019

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will 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 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

09/23/2019

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)

JORGE LUIS VILLADIEGO

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

H19000