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(Requestor's Name) (Address)	600342755496
(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	04./06/2001033020 **43.75
Special Instructions to Filing Officer:	2070 7
Office Use Only 528- 6429-	6 PH 4: 34
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ASP RODFING (OYP
DOCUMENT NUMBER: P2000004970
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JONCHMUN 2DUVIGUE2 Name of Contact Person
ASP RODTING (Orp
BUUD NW QUIT #3
Address <u>MIUMI FL. 33 00</u> <u>City/State and Zip Code</u>
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R VIQUEZ 780 at ( 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:

S35 Filing Fee

Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

□\$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

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 23, 2020

JONATHAN RODRIGUEZ 8440 NW 64 STREET #3 MIAMI, FL 33166

SUBJECT: ASP ROOFING CORP Ref. Number: P20000004970

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 120A00012377



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2020

JONATHAN RODRIGUEZ 8440 NW 64 STREET #3 MIAMI, FL 33166

SUBJECT: ASP ROOFING CORP Ref. Number: P20000004970

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please list the title(s) of each officer in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 820A00008159

Articles of Amendment	
	-
to Articles of Incorporation 2020 / 117 - 6	PHILLO
of	गा पन्छम्
ASP ROOFING LORP.	
(Name of Corporation as currently filed with the Florida Dept. of State)	·
P20000004410	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
N/A	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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 N 1 A	
(Florida street address)	
New Registered Office Address:h A.	
(City) (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.	
The toy accept the appointment as registered agent. I am jumiliar with and accept the obligations of the position.	
NIA	
Signature of New Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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## 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. Changes should be provident to provide the provident of the provident of

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:

<u>A</u> Change	<u>PT John</u>	Doe	
X Remove	<u>⊻ Mike</u>	Jones	
<u>X</u> Add	<u>SV Sally</u>	Smith	
Type of Action (Check One)	Title	Name	Address
i) Change Add Remove	AR	mericales amelia murines	13371 SW 89 Terr Unit F
2) Change			<u>miumi FL33</u> 180
Remove 3) Change			
Add Remove 4) Change			
Add Remove 3) Change			
<ul> <li>Add</li> <li>Remove</li> <li>Change</li> </ul>			
Add			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) to Add un additional THE CHUMAE RELIVES 161 11 An elly murtinez to the 61 MFYLED ρ  $\left| \right\rangle$ Hil O h r GCOV  $\Omega \gamma$ \_\_\_\_\_ 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)  $\Omega$ P

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The date of each amendment(s) adoption: <u>AVGVST 3YCL 2020</u> , if other than the date this document was signed.
Effective date if applicable:81312020
(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 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 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
by
(voling group)
Dated <u>913120</u> 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)
(Typed or printed name of person signing)
<u>PY ESI (IEM</u> +- (Title of person signing)

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