## P20 0000 37903

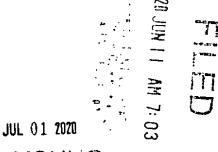
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Certified Copies	_ Certificates	of Status
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06/11/20--01009--018 \*\*35.00



S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: ROGER RENOVA	ATION		
	MBER: P20000037903			
The enclosed Article	es of Amendment and fee are su	ubmitted for filing.		
Please return all cor	respondence concerning this ma	atter to the following:		
	ROGER A CRUZ FLORES			
	-	Name of Contact Perso	n	
	ROGER RENOVATION CO	ORP		
		Firm/ Company		
	2657 CRATER CT			
		Address		
	LAKE MARY FL 32746			
		City/ State and Zip Cod	e	
	cruz441@live.com			
	<del>-</del>	sed for future annual report	notification)	
	•	•	,	
For further informati	ion concerning this matter, plea	se call:		
Roger A	. Cruz Hores	772 at (	361-4564	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
	for the following amount made			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>M</u> :	ailing Address	Street	Address	
	nendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314			N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

ROGER	RENO	VATION	3 CORP
KUKHEK	NINU	V 23 1 1 ( / 1	1 CO KI

(Name o	of Corporation as currentl	y filed with the Florida De	pt. of State)	
P20000037903				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amer	ndment(s) to
A. If amending name, enter the new na	ame of the corporation:			
<del></del>			The	n and
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cochartered," "professional association,"	Corp,'' "Inc," or "Co". A	company," or "incorporated professional corporation	"or the abbreviation "Co	rp.,"
B. Enter new principal office address,	if applicable:			
(Principal office address MUST BE A S				
			<del></del>	<del>_</del>
C. Enter new mailing address, if appli	icable:			
(Mailing address MAY BE A POST				
D. If amending the registered agent an	ıd/or registered o <u>ffice addı</u>	ress in Florida, enter the n	ame of the	
new registered agent and/or the new	w registered office address	<u> </u>		
Name of New Registered Agent	ROGER A CRUZ FLORE	S		
	2657 CRATER CT	·		
	(Florida str	eet address)		
	LAKE MARY		32746	
New Registered Office Address:		(City)	, Florida	
		•		
New Registered Agent's Signature, if c	hanging Registered Agent	<u>1</u>		
I hereby accept the appointment as regist	tered agent. I am familiar v	with and accept the obligation	ons of the position.	
Roa	CC A CANZ F	lores	2	
	Signature of New R	egistered Agent, if changing	120	
	<del>-</del>			77
Check if applicable  ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11)	(e), F.S.		t to the said

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	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
1) X Change	P	ROGER A CRUZ FLORES	2657CRATER CT		
Add			LAKE MARY FL 32746		
Remove	VP	NOLVIA M RODRIGUEZ	2657 CRATER CT		
2) X Change Add			LAKE MARY FL 32746		
Remove 3) Change	d <del>es aus</del>				
<b>A</b> dd					
Remove					
4) Change					
Add Remove					
5) Change					
Add			<del></del>		
Remove					
6) Change		<u> </u>			
Add					
Remove					

(Attach ad	ing or adding additional Art ditional sheets, if necessary).	(Be specific)	<del>,</del> .		
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<u>.</u>	<u> </u>				
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If an ame	ndment provides for an excl	nange, reclassificatio	n, or cancellation of	issued shares,	
<u>provision</u>	ns for implementing the ame or applicable, indicate N/A)	ndment if not contai	ned in the amendme	ent itself:	
(1) 110	п аррисионе, таксите тту				
	····				
				<u></u>	
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		<del></del>			

	06/08/20	
The date of each amendment date this document was signed	l.	if other than
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will no the Department of State's records.	ot be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action and sh	areholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):  s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
06/08 Dated Signature	Roser A- Cos Horas	
(E	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	ROGER A CRUZ FLORES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

the