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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SPECIALISTS IN	ROOF INC		
DOCUMENT NUMI	BER: P20000048097			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	ARTURO ZUNIGA			
		Name of Contact I	Person	
	SPECIALISTS IN ROOF IN	C		
		Firm/ Compar	ny	
	3510 GUILFORD RD	•		
		Address		 -
	NAPLES, FL 34112			
		City/ State and Zip	Code	<u>- 111-0</u>
	artzh27@gmail.com			
	E-mail address: (to be us	sed for future annual r	eport n	otification)
For further information	n concerning this matter, pleas	239		289-9499
Name o	of Contact Person	Arc	ea Code) & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida	Depart	ment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fed Certified Copy (Additional copy in enclosed)		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	A D Ti 24	ivision he Cen 415 N.	ddress ent Section of Corporations tre of Tallahassee Monroe Street, Suite 810 ee, FL 32303

Articles of Amendment to Articles of Incorporation of

SPECIALISTS IN ROOF INC

(Name of Corpor	ration as currently filed with the Fl	lorida Dept. of State)
P20000048097		
(Do	ocument Number of Corporation (if ki	nown)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Cor	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the ROOF SPECIALISTS INC	e corporation:	The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	Inc," or "Co". A professional cor	orporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applica	able:	
(Principal office address <u>MUST BE A STREET A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
		202 202
D. If amending the registered agent and/or regi	istered office address in Florida on	tor the name of the
new registered agent and/or the new register		tor the name of the
Name of New Registered Agent		6
		, P
	(Florida street address)	- 155
		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	(City)	
	(e.ij)	(zip Code)
New Registered Agent's Signature, if changing I	Registered Agent:	
hereby accept the appointment as registered agen	nt. I am familiar with and accept the	obligations of the position.
Si	ignature of New Registered Agent, if c	changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
A dd				
Remove				
4) Change		.		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach <i>additional</i>	dding additional Article sheets, if necessary). (Be specific)			
			···		
			-		
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•		·			
	<u> </u>				
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	<u>.</u>		<u>.</u>		
	 .				
				<u>.</u> .	
lf an amendment	provides for an exchang	ge, reclassificatio	n, or cancellation	of issued shares,	
provisions for in	nplementing the amendr	ment if not contai	ined in the amend	ment itself:	
(if not applie	able, indicate N/A)				
				1	
	 				
				.=	
					

late this document was signed.	adoption:	, it other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without sharehold	der action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amer ufficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment(
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated		
Signature		
selecte	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or other ated fiduciary by that fiduciary)	ot been ner court
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	