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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Elements Roofing, Inc DOCUMENT NUMBER: P20000051359 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lindsey Kennedy Name of Contact Person Firm/ Company 2038 Ashton Street Address Middleburg, FI 32068 City/ State and Zip Code lindsey.pavuk@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (904) 945-0740

Area Code & Daytime Telephone Number Lindsey Kennedy Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Elements Kooting, Inc	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P20000051359	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NIA
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N N
	29
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
110	133.
Name of New Registered Agent VIT	
tFlorida :	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	nt: or with and accept the obligations of the position.
	•
n la	
P N	Registered Agent, if changing
Signature of New	regisierea Ageni, ij 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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Antonino Milian	2667 Tacito Trail
Add			Jacksonville, Fl 32223
x Remove			
2) Change			
Add			
Remove 3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

and the second discussion	if necessary). (Be	specific)			
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n amendment provid	es for an exchange	reclassification	ar cancellation	s of icenad chara	.
ovisions for implement (if not applicable, inc	<u>iting the amendme</u>	nt if not contain	ed in the amen	dment itself:	<u></u>
	,				
NA			_		
IVIFI.					
N/F1					
IVIF1.					

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Ju	aly 16, 2020	
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	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must he separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selec	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver trustee, or other court sinted fiduciary by that fiduciary)	
	Lindsey Kennedy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	