P21000053994

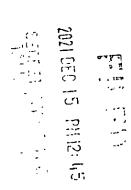
	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
Q. SILAS				
JAN 0 5 2022				

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Roof Angel Exterior Services, Inc. DOCUMENT NUMBER: P21000053994 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dean M. Allard Name of Contact Person Roof Angel Exterior Services, Inc. Firm/ Company 751 Rhoden Cove Rd. Address Tallahassee, Fl. 32312 City/ State and Zip Code Deanoallard@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850) 509-9995

Area Code & Daytime Telephone Number Dean M. Allard Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 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 (Additional Copy enclosed) is enclosed) **Street Address** Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



POOF ANGEL EXTERIOR SERVICES, INC.

Check if applicable

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

2021 DEC 15 PH 12: 45

(Name of Corporation as curre	ently filed with the Florida Dept; of State)
1000053994	TALE
(Document Number	er of Corporation (if known)
rsuant to the provisions of section 607,1006, Florida Statutes, t Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corporation	<u>u</u>
	The new
me must be distinguishable and contain the word "corporation, nc.," or Co.," or the designation "Corp," "Inc," or "Co" hartered," "professional association," or the abbreviation "P.	""company," or "incorporated" or the abbreviation "Corp.," '. A professional corporation name must contain the word 'A."
Enter new principal office address, if applicable:	751 Rhoden Cove Rd.
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	Tallahassee, Fl. 32312
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	751 Rhoden Cove Rd.
(Maling duaress MAT BE ATOST OTTICE BOX)	Tallahassee, Fl. 32312
If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office add	ress:
Name of New Registered Agent Dean M. Allard	
751 Rhoden Cove Rd.	
(Florida	a street address)
New Registered Office Address:	_, Florida 32312

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>	<u>Addres</u> s
1) Change	P	Gregory S. Bostwick	2603 Opequon Bend
Add			Tallahassee Fl. 32312
X Remove			
2) X Change	V	Dean M. Allard	751 Rhođen Cove Rd.
Add			Tallahassee, Florida 32312
Remove 3) X Change	P	Dean M. Allard	751 Rhoden Cove Rd.
Add			Tallahassee, Fl. 32312
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	
<u> </u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ership shares of Roof Angel Exterior Services, Inc.
egory 3. Bostwick retringuishes an owne	Tamp shares of Roof Angel Exterior Services, Inc.
18 1	

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The date of each amendment(s) adoption:	, if other than the
(no more than 90 da	vs after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board action was not required.	d of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The nur by the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	
by	"
Signature (By a director, president or other officer – selected, by an incorporator – if in the hal appointed fiduciary by that fiduciary) Dean M. Allard (Typed or printed name)	if directors or officers have not been ands of a receiver, trustee, or other court
(Title of person signing	<u>,</u>