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From:

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Account Number : I20110000069 Phone

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Page 20f 6 H23000380605

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	SMART ROOFING	G OF SWFL INC		
DOCUMENT NUMBER: P21	000017445			
The enclosed Articles of Amend	ment and fee are sul	bmitted for filing.		
Please return all correspondence	concerning this mat	tter to the following:		
ANNETT	E MOTA			
		Name of Contact Perso	n	
API PRO	CESSING - LICEN	SING INC		
		Firm/ Company	·	
. 3419 GAI	LT OCEAN DRIVE	SUITE A		
· · · · · ·		Address	······································	
FORT LA	UDERDALE FL 3	3308		
		City/ State and Zip Cod	e	
ANNETT	E@APIPROCESSI	NG.COM		
• •		ed for future annual report	notification)	
. •		•		
For further information concernit	ng this matter, please	e call:		
ANNETTE MOTA	· · _ ·	21 ( <u>954</u>	567-0013 X 12	
Name of Contact I	Porson	Area Co	de & Daytline Telephone Number	
Enclosed is a check for the follow	ving amount made p	ayable to the Florida Depa	artment of State:	
	.75 Filing Fee & ifficate 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 Addre			Address	
Amendment Se Division of Cor		Amendment Section Division of Corporations The Centre of Tallahassee		
P.O. Box 6327				
Talinhassee, FL			I. Monroe Street, Suite 810	
	, .		ssee, FL 32303	

Page 3 of 6 H23000 380 605

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed	with the Florida Dept. of State)
P23000033146	
(Document Number of Corp	poration (if known)
Pursuant to the provisions of section 607, 1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	a Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," "compa Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A prof chartered," "professional association," or the abbreviation "P.A."	ny," or "incorporated" or the abbreviation "Corp."
E-tonormanical efficient delication and the second	중
Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	
	7
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
The state of the s	
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. If amending the registered agent and/or registered office address in	Florida, enter the name of the
If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:  Name of New Registered Agent	Florida, enter the name of the
new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent	
Name of New Registered Agent  (Florida street add)	
Name of New Registered Agent  (Florida street address:  New Registered Office Address:	Florida_
Name of New Registered Agent  (Florida street add)	·95)
Now Registered Office Address:  Now Registered Office Address:	Florida
Name of New Registered Agent  (Florida street address:  New Registered Office Address:  (City)	Florida_
Name of New Registered Agent  (Florida street additional New Registered Office Address:  (City)  We Registered Agent's Signature, if changing Registered Agent:	Florida(Zip Code)
Name of New Registered Agent  (Florida street additional New Registered Office Address:  (City)  We Registered Agent's Signature, if changing Registered Agent:	Florida(Zip Code)
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Name of New Registered Agent  (Florida street adding New Registered Office Address:  New Registered Office Address:  (City)  we Registered Agent's Signature, if changing Registered Agent:  sereby accept the appointment as registered agent. I am familiar with and  Signature of New Registered	Florida
Name of New Registered Agent  (Florida street adding New Registered Office Address:  (City)  Wew Registered Agent's Signature, if changing Registered Agent:  wereby accept the appointment as registered agent. I am familiar with and Signature of New Registered agent.	Florida(Zip Code)  d accept the abligations of the position.
Name of New Registered Agent  (Florida street adding New Registered Office Address:  (City)  www. Registered Office Address:  (City)  www. Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and	Florida(Zip Code)  d accept the abligations of the position.

## Page 40f 6 H23000380605

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 V		Mike Jones			
X Add SV.		Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	\$	ADRIANA MORENO	2005 ODESSA CIRCLE		
X Add			LABELLE FL 33935		
Remove.					
2) Change					
Add	•		2023 1,'0\v		
Remove 3) Change	<u>.</u>				
Add					
Removo		. **			
4) Change		- · · · · · · · · · · · · · · · · · · ·			
Add					
Remove					
5)Change					
Add					
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(i) Change		, '* _			
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Remove					

Page 5 of 6 H23000 380605

	ng additional Article sets, if necessary). (				
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(у пог аррисави	s, indicale N/A)		r cancellation of issi	und shares, itself:	-
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(у пог аррисави	s, indicale N/A)		r cancellation of issi	und shares, itself:	

The date of each amendment(s) adaption: 10/30/2023 date this document was signed.	, if other than the
Effective date if applicable:	,
(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 a document's effective date on the Department of State's records.	ot be listed at the
Adoption of Amendment(a) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder setton and shareholder setton was not required.	archalder
The amendment(s) wastwere adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders wastwere sufficient for approval.	2023 F.OV
The amendment(s) was were approved by the sharoholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	1.0.1
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by FRANCISCO MARTINEZ	P.1.
(voting group)	
Dated 10/30/3023	1: 1: O
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)	
FRANCISCO MARTINEZ	
(Typed or printed name of person signing)	<del>-,</del>
<u>P</u>	
(Title of person signing)	