P23000036130

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: G.V. ROOFING, I	NC	~~~~
DOCUMENT NUMI			<u> </u>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	MARIA MARIN		
		Name of Contact Person	1
	M. MARIN, INC		
		Firm/ Company	.,
	4147 N DIXIE HWY		
		Address	
	FORT LAUDERDALE, FL	33334	
		City/ State and Zip Cod	e
	maria@mmarininc.com		
		sed for future annual report	notification)
	n concerning this matter, plea		517 030v
MARIA MARIN		at () 537-9200 de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
	ndment Section	Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)	
P230000361	130		
	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporatio	on adopts the following	g amendment(s)
A. If amending name, enter the new name of the corporation:	<u>:</u>		
·	****		The new
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 professional corporation	on name must contait	n the word
Enternal district office address if applicables			20.
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)			- 733
			<u> </u>
Passa and addition address if anyther las	,		- 1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			· -
	-		
			<u>171</u>
			
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address.		e name of the	
Name of New Registered Agent			
the by the regular out again			_
(Florida	a street address)		-
New Registered Office Address:		, Florida	
New Registered Office Address.	(City)		Code)
Sew Registered Agent's Signature, if changing Registered Ag	ent:	-ciona -Cela manition	
hereby accept the appointment as registered agent. I am famili	ar with and accept the obligi	ations of the position.	
Signature of Ne	w Registered Agent, if chang	ing	_
heat if applies his			
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: \underline{X} Change	<u>PT</u>	John Doe	
X Remove	<u>Y</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	VP	MARIA M MARIN	1921 NE 52 CT
X Add			FORT LAUDERDALE, FL 33308
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional At sheets, if necessary)). (Be specific)	12/		
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f an amandmei	it provides for an e	xchange, reclassifica	ation, or cancellation	on of issued shares,	
provisions for	mplementing the a	mendment if not co	ntained in the ame	ndment itself:	
	icable, indicate N/A)				
(if not appl					
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	05/18/2023	
The date of each amendment(s) adoption: _date this document was signed.		, if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this of State's records.	s date will not be listed as
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendme or approval.	ent(s)
	the shareholders through voting groups. The following stating group entitled to vote separately on the amendment(s):	- l'ement
"The number of votes east for the arr	nendment(s) was/were sufficient for approval	
by		
(v	roting group)	
05/18/2023		
Dated		
Signature GUSTAUO	Vilchiz,	
(By a director, pro selected, by an in	esident or other officer – if directors or officers have not be neorporator – if in the hands of a receiver, trustee, or other cary by that fiduciary)	
GUSTAV	VO VILCHIZ-CRUZ	
	(Typed or printed name of person signing)	
PRESID	ENT	
	(Title of person signing)	

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the