## P23000053118

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
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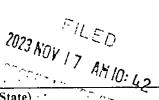
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Skyline Roofing Co	ontractors Inc	
DOCUMENT NUMI	BER: P23000053118		
	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Jordan T Peters		
		Name of Contact Person	
	Skyline Roofing Contractors	Inc	
		Firm/ Company	
	63 Friendly Lane		
		Address	
	Shalimar FL 32579		
		City/ State and Zip Code	
	anitajhorn@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Jordan T Peters		at ( <u>850</u>	420-0964
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ S35 Filing Fee	■S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of



Skyline Roofing Contractors Inc

(Name of Corporation as currently filed with the Florida Dept. of State) P23000053118 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent \_ (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if 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 Doc		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Saily Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	VP	Jerry R Berry	305 Pelham Road	
X Add	•		Fort Walton Beach, FL. 32547	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an exc	<u>hange, reclassificati</u>	on, or cancellation	on of issued sha	ares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not conta	ined in the ame	nament itseit:		
(ij not applicable, indicale WA)					
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· · · Novo	ember 4th, 2023, if other than the
The date of each amendment(s) adoption:date this document was signed.	
Effective date if applicable:	
interior date in approximate	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as the state's records.
Adoption of Amendment(s) (CHE	CCK ONE)
The amendment(s) was/were adopted by the ir action was not required.	ncorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) pproval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting §	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
	dment(s) was/were sufficient for approval
by	<u> </u>
by(votin	ng group)
DatedSignature	
(By a director, presi	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
Jordan T Pc	ters
(	Typed or printed name of person signing)
President	
(	Title of person signing)