# P97000008408

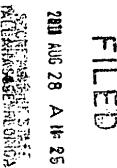
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### **COVER LETTER**

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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION	ALL AREA RO	OFING & WA	TERPROO	FING, INC	
OCUMENT NUMBER: P97000022408					
The enclosed Articles of Amer	adment and fee are su	bmitted for fil	ing.		
Please return all corresponden	ce concerning this ma	tter to the follo	owing:		
ANDRE	EW GRIFFIS				
		Name of C	ontact Persor		
ALL AF	REA ROOFING & W	/ATERPROC	FING, INC		
	<del></del>	Firm/	Company		
1820 N	1 57TH ST		• -		
		Ac	dress		
TAMPA	A, FL 33619				
		City/ State	and Zip Code		
LISA@ALLA	REAROOFING.CO	М			
_	mail address: (to be us		innual report	notification)	
	•		•	·	
For further information concer	ning this matter, pleas	se call:			
LISA POSLUSNY		at	813	247-7663	
Name of Conta	ect Person			de & Daytime Telephone Number	
Enclosed is a check for the fol	lowing amount made	payable to the	Florida Depa	artment of State:	
	-	. ,	•		
	543.75 Filing Fee & Certificate of Status	□\$43.75 F Certified (Addition enclosed	Copy al copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ad			Address		
Amendment	Amendment Section				
Division of ( P.O. Box 63	Division of Corporations Clifton Building				
Tallahassee.	2661 Executive Center Circle				

Tallahassee, FL 32301

#### Articles of Amendment

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#### Articles of Incorporation

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#### ALL AREA ROOFING & WATERPROOFING, INC

## (Name of Corporation as currently filed with the Florida Dept. of State) P97000022408 (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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BON) 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: DOUGLAS RICHARDS Name of New Registered Agent 1820 N 57TH ST (Florida street address) TAMPA 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 familiar with and accept the obligations of the mo Signature of New Registered Agent, if changing

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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	LINDA POTTER	1820 N 57TH ST
Add _X Remove			TAMPA, FL 33619
2) Change	S	TIFFANY RICHARDS	1820 N 57TH ST
X Add			TAMPA, FL 33619
Remove			
3 ) Change	-		
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

N/A	eets, if necessary). (Bo	: ѕресіле)			
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16				and chance	
provisions for imp	rovides for an exchange lementing the amendmole, indicate N/A)	ent if not contained	d in the amendmen	t itself:	
(if not applicat N/A	ole, indicate N/A)				
					<del></del>
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			<del> </del>	·	
	<del></del>	<del></del>		<del></del>	<del>_</del>

	08/27/18		
The date of each amendment(s) a			, if other than the
date this document was signed.			
	3/27/18		
Effective date if applicable:			
	(no more than 9	90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De		icable statutory filing requirements, this date wil	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were add by the shareholders was/were st		e number of votes cast for the amendment(s)	
		rough voting groups. The following statement vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/wer	re sufficient for approval	
by	(voting group)	·	
•	(voting group)		
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors	s without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators with	hout shareholder action and shareholder	
08/27/1	8		
Dated		$\overline{}$	
	() (/ h)	/////	
Signature	Degn //	uloul	<del></del>
		icer - if directors or officers have not been	
		he hands of a receiver, trustee, or other court	
appoir	ted fiduciary by that fiduciary)	Ĵ	
	DOUGLAS RICHARD	98	
	(Typed or printed	name of person signing)	
	PRESIDENT		
	(Tide	of nerson signing)	