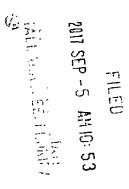
## P970005603

| (Requestor's Name)                      |  |
|---|--|
| (Address)                               |  |
| (Address)                               |  |
| (City/State/Zip/Phone #)                |  |
| PICK-UP WAIT                            | MAIL   |
| (Business Entity Name)                  | <del>                                     </del> |
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| (Document Number)                       | <del>- ii</del>                                  |
| Certified Copies Certificates of        | Status   |
| Special Instructions to Filing Officer: |  |
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C. GOLDEN SEP - 7 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION. Entern                        | ra Rooffile Corporation - Indiantown  |
|--|---|
|  | DO 56003  |
| The enclosed Articles of Amendment and fee are     | submitted for filing.   |
| Please return all correspondence concerning this   | natter to the following:  |
| Amy T  | Name of Contact Person  |
| ,  | Name of Contact Person  |
|  | Firm/ Company   |
| 1361 River   | side Dr.  |
|  | Address   |
| _Stuart,FL   | 34994   |
|  | City/ State and Zip Code  |
| amultour 6   | City/ State and Zip Code  Qmail. com  usel for future annual report notification) |
| E-mail address: (to be                             | uch for future annual report notification)  |
|  |   |
| For further information concerning this matter, pl | ease call:  |
| Amy Towar  | at (772 ) 204 - 4437  |
| Name of Contact Person                             | Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount mad   | le payable to the Florida Department of State:                                    |
| \$35 Filing Fee Secretificate of Status            |   |
| Mailing Address                                    | Street Address  |
| Amendment Section                                  | Amendment Section   |
| Division of Corporations                           | Division of Corporations  |
| P.O. Box 6327<br>Tallahassee, FL 32314             | Clifton Building 2661 Executive Center Circle                                     |
| 1 analid5500, 1 U 32314                            | Tallahassee, FL 32301   |

## Articles of Amendment to Articles of Incorporation of

FILED

| Entegra  | Roof                      | Tile             | Corpa                   | oratio        | n -        | Indiant                              |                                | 2017 SEP -5                                       | AH 10: 53   |
|--|---------------------------|------------------|-------------------------|---------------|------------|--------------------------------------|--------------------------------|---|-------------|
| J  | (Nar                      | ne of Corp       | oration as              | currently f   | iled with  | the Florida De                       | pt. of State)                  |   |             |
| P9700  | 005                       | 600              | 3                       |               |            |                                      |                                | Tales is at                                       | ic FiloRiby |
|  |                           | (1)              | ocument N               | umber of C    | orporatio  | on (if known)                        |                                | <u>ड</u> ी  |             |
| Pursuant to the provisions its Articles of Incorporation                   | on:                       |                  |                         |               | orida Pro  | ofit Corporation                     | adopts the fol                 | lowing amendmen                                   | nt(s) to    |
| A. If amending name, er  | iter the nev              | v name of t      | <u>he corpora</u>       | tion:         |            |                                      |                                |   |             |
| 15700 F  | <u>arms</u>               | Inc              |                         |               |            |                                      |                                | The new   |             |
| name must be distinguis. "Corp.," "Inc.," or Co., word "chartered," "profe | hable and<br>" or the de. | contain the      | word "co.<br>Corp," "In | c," or "Co    | ". A pre   | any," or "incorp<br>ofessional corpo | porated" or i<br>ration name i | the abbreviation<br>must contain the              |             |
| B. Enter new principal of (Principal office address                        |                           |                  |                         | 73            |            |                                      |                                | <del></del>                                       |             |
| (1 rincipal office dudress)  | MUSI BL.                  | <u> </u>         |                         | .,            |            |                                      |                                |   |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
| C. Enter new mailing a (Mailing address MA)                                |                           |                  | E BOY                   |               |            |                                      |                                |   |             |
| (Maning unaress <u>MA</u>  | I BE A FU.                | <u> SI OFFIC</u> | <u>е вол</u> /          |               | -          |                                      |                                |   |             |
|  |                           |                  |                         |               | •          |                                      |                                | <del>, , , , , , , , , , , , , , , , , , , </del> |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
| D. If amending the regis   | tered agen                | t and/or re      | <br>gistered off        | ice addres    | s in Flori | ida, enter the na                    | me of the                      |   |             |
| new registered agent   | and/or the                | new regist       | ered office             | address:      |            |                                      |                                |   |             |
| Name of New Re   | gistered Age              | <u>:nt</u>       | <u> </u>                |               |            |                                      |                                |   |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
|  |                           |                  | (F)                     | lorida street | address)   |                                      |                                |   |             |
| New Registered (   | Office Addre              | <u>'88</u> :     |                         |               |            |                                      | , Florida                      |   |             |
|  |                           |                  | İ                       | (C            | ity)       |                                      |                                | (Zip Code)  |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
| New Registered Agent's   | Sionature                 | if changing      | Registere               | d Agent:      |            |                                      |                                |   |             |
| I hereby accept the appoin   |                           |                  |                         |               | h and acc  | cept the obligation                  | ns of the posi                 | tion.   |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
|  |                           |                  |                         |               |            |                                      |                                |   |             |
|  |                           |                  | !!<br>Signature c       | of New Reg    | istered A  | gent, if changing                    | <del>.</del>                   |   |             |

| Executive Officer: CFO held. President, Treasure Changes should be noted | = Chief I<br>er, Directe<br>I in the fo<br>ives the c | t: T= Treasurer,<br>Financial Office<br>or would be PTI<br>llowing manner,<br>orporation, Sall | r. If an officer/director holds mor<br>D.<br>Currently John Doe is listed as th<br>ly Smith is named the V and S. Thes | Trustee; C = Chairman or Clerk; CEO = Chief to than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is see should be noted as John Doe, PT as a Change, |
|--|---|--|--|--|
| Example:   |   | i)   |  |  |
| X Change   | PT  | John Doc   |  |  |
| X Remove   | <u>V</u>  | Mike Jones   |  |  |
| X Add  | <u>SV</u>   | Sally Smith  |  |  |
| Type of Action<br>(Check One)  | Title   | Name<br>   | <u>e</u>   | Address  |
| 1) Change  |   |  |  |  |
| Add  |   |  |  |  |
| Remove   |   |  |  |  |
| 2) Change  |   | _  |  |  |
| Add  |   |  |  | <del></del>  |
| Remove   |   |  |  |  |
| 3 ) Change   | <del></del>   | <u> </u>   | 1  |  |
| Add  |   |  |  |  |
| Remove   |   |  |  |  |
| 4) Change  |   |  |  |  |
| Add  |   | <del></del>  | 1  |  |
| Remove   |   |  |  |  |
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| 5) Change  |   |  |  | <del></del>  |
| Add  |   |  |  |  |
| Remove   |   |  |  |  |
| 6) Change  |   |  |  |  |
| Add  |   |  |  | 7 SL   |
| Remove   |   |  |  |  |

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:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

| E. | If amending or adding additional Articles    | enter change(s) here:                               |
|----|--|---|
|    | (Attach additional sheets, if necessary). (B | specific)   |
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| F, | If an amendment provides for an exchang      | reclassification, or cancellation of issued shares, |
|    | provisions for implementing the amendn       | nent if not contained in the amendment itself:      |
|    | (if not applicable, indicate N/A)            |   |
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| The date of each amendment(s) adoption: 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 r document's effective date on the Department of | opt meet the applicable statutory filing requirements, this date will not be listed as the                         |
| Adoption of Amendment(s) (CF   | I <u>ECK ONE</u> )   |
| ☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for         | shareholders. The number of votes east for the amendment(s)  |
|  | shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the ame  | j)<br>ndment(s) was/were sufficient for approval   |
| by   |  |
| •  | ting group)  |
| The amendment(s) was/were adopted by the action was not required.                              | board of directors without shareholder action and shareholder  |
| ☐ The amendment(s) was/were adopted by the action was not required.                            | incorporators without shareholder action and shareholder   |
| Dated 8/29/1   | 7  |
| Signature  |  |
| (By a director, pro-<br>selected, by an inc<br>appointed fiduciar                              | ident or other officer – if directors or officers have not been or other court y by that fiduciary)                |
| Te   | rry Johnson  |
|  | (Typel or printed name of person signing)  |
| R  | resident   |
|  | (Title of person signing)  |
|  |  |
|  | li li  |