P98000016018

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DOUGLAS FAMI	LY HOLDINGS INC.			
	1BER: P98000016018				
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	MARC DOUGLAS				
	Name of Contact Person				
		Firm/ Company			
	135 WESTON ROAD, SUIT	E 319			
		Address	<u> </u>		
	WESTON, FL 33326				
		City/ State and Zip Cod	c		
	MADTHMM@AOL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea	se call:			
MARC DOUGLAS		954 at (214-5912		
Name			de & Daytime Telephone Number		
finelosed is a check t	for the following amount made	payable to the Florida Dep	artment of State.		
\$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations			Address Iment Section		
		Divisio	on of Corporations		
P.O. Box 6327		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 currently filed with the Florida Dept. of State) P98000016018 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the feits Articles of Incorporation: A. If amending name, enter the new name of the corporation: ROOFTOP RESCUE INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SUITE 903	ollowing amendment The new reviation "Corp"	
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2011E 903		
DAVIE CL 2221		
DAVIE, FL 33314		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 135 WESTON ROAD		
SUITE 319	SUITE 319	
WESTON, FL 33326		
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 N/A		
N/A		
(Florida street address)		
New Registered Office Address: N/A, Florida	/A	
(City)	(Zip Code)	

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)

Example:

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.

X Change	$\overline{\mathbf{b}.\mathbf{L}}$	John Doe	
X Remove	<u>V</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		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A —	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

e <u>11 an</u> (Attac	ending or adding additional Articles, enter change(s) here: A additional sheets, if necessary). (Be specific)
N/A	
F. If an	mendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	sions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)
N/A	noi appuvanie, maicare x/A)
INT 21	

	N/A		
The date of each amendment(s)	adoption:		, if other than the
date this document was signed.			
N Effective date <u>if applicable</u> :	A		
	(no more than 90 day)	s after amendment file date)	
Note: If the date inserted in this document's effective date on the		statutory filing requirements, this date w	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was were a action was not required.	dopted by the incorporators, or board	of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was were a by the shareholders was were		nber of votes cast for the amendment(s)	
	pproved by the shareholders through or each voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):	
"The number of votes ea	st for the amendment(s) was/were suf	flicient for approval	
by NA			
,	(voting group)		
SEPT 10	. 2020		
Dated	_	_	
Signature			-
(Hy a	director, president or other officer – it ted, by an incorporator – if in the hand inted fiduciary by that fiduciary)	if directors or officers have not been ds of a receiver, trustee, or other court	
	MARC DOUGLAS		
	(Typed or printed name	of person signing)	
	DIRECTOR		
	(Title of person signing))	