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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Revels Roofing, Inc. P990000 86523 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Revels Roofing Inc.

Firm/ Company 1514 Watter Green Rd Address Rockinsbar & Aol. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (863) 673-0452

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

	of	F (LED
Revels Roofin	ng, Inc		
(Name of Corporati	on as currently filed with the Flor	rida Dept. of State) - u
P 99 0000 86523		A service of the serv	CHARLET TO THE CONTROL OF THE CONTRO
(Docum	nent Number of Corporation (if kno	wn) Perkerin	स्याधानम् व्याप्रचार
arsuant to the provisions of section 607.1006. Florida Articles of Incorporation:	a Statutes, this Florida Profit Corpo	oration adopts the f	ollowing amendment
. If amending name, enter the new name of the co	orporation:		
N/A			The new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the	," "Inc." or "Co". A professiona	incorporated" o al corporation nam	r the abbreviation e must contain the
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADL</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	NA NA		
). If amending the registered agent and/or register new registered agent and/or the new registered		r the name of the	
	ammy M Sodrel		
Name of New Registered Agent			
	Walter Green Rd		
1514 V	(Florida street address)		
1514 V	Walter Greer Rd (Florida street address) Belle	, Florida_	33935

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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	· Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>_S_</u>	Barbara A. Revels	911 Spratt Plvd
Add			Labelle FL 33935
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sh	nects, if necessary). (B	enter change(s) hero e specific)		
Tammy	M Sodrel;	450 Sha	res = 90%	
Ronald m	M Sodrel; Revels;	50 Sha	res = 10%	
	rovides for an exchang lementing the amendm			
	ble, indicate N/A)	en a not comunico.	n yne amenoment tiset	<u></u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	reholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated	
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	ot been ner court
Tammy M. Sodrel (Typed or printed name of person signing)	
President	
(Title of person signing)	