FILED 2003 FOR PROFIT CORPORATION Feb 14, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR Secretary of State P99000094601 **DOCUMENT #** 02-14-2003 90213 042 ***150.00 1. Entity Name J & K ROOFING, INC. Mailing Address Principal Place of Business 2013 LEE STREET 2013 LEE ST. HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 3. Mailing Address 2. Principal Place of Business ☐ CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number 65-0955860 City & State Not Applicable City & State \$8.75 Additional 5. Certificate of Status Desired Country Zip Fee Required Country Zip 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DIVETO, CHARLES M JR. 7425 N.W. 4TH STREET PLANTATION FL 33317 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. DATE (NOTE: Registered Agent signature required when reinstating) SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS Addition CO/U1 / 10/05 10. TITLE ☐ Delete Herron , Donnie TITLE Donnie NAME HERRON; DONAVE NAME STREET ADDRESS 2013 LEE STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33020 **K**Addition Change CITY-ST-ZIP V. P. TITLE □ Delete J. Herron Frederick FREDERICK J. HERRON TITLE NAME LEE STREET NAME STREET ADDRESS 2013 LEE STREET STREET ADDRESS 33620 CITY-ST: ZIP Hollywood, Florid . Addition ☐ Change CITY-ST-ZIP TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Addition CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Addition Change CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Addition CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if other like empowered. changed, or on an attachment with

SIGNATURE: