## 1/30747

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DIEYCE ROOTING OF CENTRAL Florida, Inc
DOCUMENT NUMBER: V30747
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
Aerce Roofing of Central Florida, Inc.
710 W RObinsun St Address
Or Lando, FL 32505  City/ State and Zip Code
PIERCEYOUTING 19 @ CINICIL COM E-mail address: (to be used for tulus: annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (407 ) 53312403  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclose!)  S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite \$10

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation of

$\mathcal{L}$	FLOX 10102921/2722-6 PH 2:49
Pierce Routing of lentral	Flor idailing
(Name of Corporation as currently	v filed with the Florida Dept. of State)
V5UT41	
: (Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A,	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany "or "incorporated" or the abbreviation "Corn"
B. Enter new principal office address, if applicable:	TILL W ROHINSON ST
(Principal office address MUST BE A STREET ADDRESS)	Drianao (FL 32805
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	714 W ROBINSUM St
	Dr Lando   FL 32805
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent TXVV CI. +	TCICINS:
710 W RC (Florida sire	DOMSON SH pet address)
New Registered Office Address: OY ( )	(City) . Florida 3 & 0 + - (City) . (Rip Code)
	Comp Sandy
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	rith and accept the obligations of the position.
1 Julier	
Signature of New Re	egistered 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/sirector 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 PTJohn Doe X Remove  $\underline{V}$ Mike Jones  $\underline{X}$  Add SV Sally Smith <u>Title</u> Type of Action Name Address (Check One) Blaine Pierce 31339 Saunclers Dr 1) \_\_\_\_ Change Add OTCIVCITESIFU 32778 X\_Remove Darrell Adkins-2) \_\_\_\_ Change 714 W ROBINSON ST X Add DILANDOR 328US \_\_\_\_ Remove Divia Jackson 3) Change TILD W ROMINSONST  $_{
m bbA}$  imesOrlando 15 32805 \_\_\_ Remove Blaine Pierce 4) \_\_\_\_ Change

Tavares, F. 32778 \_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 6) \_\_\_\_ Change \_\_\_ Add Remove Page 2 of 4

E.	If amending or adding add	litional Articl	es, enter	change(s)	here:
	(Attach additional sheets, if	necessary)	(Be sneci	fic)	

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(if not applicable, indicate N/A)	ment if not contained in the amendment itself:	
	,	<del></del>
	Page 3 of 4	
n		ŧ
The date of each amendment(s) adoption: late this document was signed.		, if other than the
and this document was signed.	_	
Effective date <u>if applicable</u> :	110,2019-	
	(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, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE)  $\square$  The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature • (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)