



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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SECRETARY OF STATE  
CORPORATIONS DIV  
2018 FEB -12 PM 12:43

## Articles of Amendment

DOMESTIC Business Corporation

→ Filing Fee: \$50.00 (\$210 for an increase in authorized shares)

Pursuant to the provisions of RIGL 7-1.2-905, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:

1. Entity ID Number:  <b>00021981</b>	2. The name of the corporation is:  <b>Roofing Concepts, Inc.</b>												
3. The shareholders of the corporation (or, where no shares have been issued by the board of directors of the corporation) in the manner prescribed by RIGL 7-1.2 adopted the following amendment(s) to the Articles of Incorporation on:													
4. If the entity's name is changing, state the new name: <b>Reynolds Roofing, Inc.</b> <div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>													
5. If the total authorized shares are changing complete the following section: *List ALL authorized shares as of this amendment. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 35%;">Total Authorized Shares (Number of Shares)</th> <th style="text-align: left; width: 35%;">Class of Stock</th> <th style="text-align: left; width: 30%;">Par Value Per Share</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>		Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	_____	_____	_____	_____	_____	_____	_____	_____	_____
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share											
_____	_____	_____											
_____	_____	_____											
_____	_____	_____											
6. If the period of its duration is changing complete the following section: <b>CHECK ONE BOX ONLY</b>													
<input type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____													
<div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>													
7. If the entity's purpose is changing complete the following section: *The new purpose should include ALL activity to be transacted in the State of Rhode Island.													
<div style="display: flex; justify-content: space-between;"> <span>Check the box to indicate an attachment <input type="checkbox"/></span> <span>Check the box to indicate no change <input type="checkbox"/></span> </div>													

### MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

12:43

**FILED**

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BY 00323329

8. If adding or amending additional provisions, complete the following section:

Check the box to indicate an attachment ☐

Check the box to indicate no change ☐

9. As required by RIGL 7-1.2-105, the corporation has paid all fees and taxes.

10. Date when these Articles of Amendment will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) \_\_\_\_\_

*Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Authorized Officer of the Corporation

Leonard M. Reynolds

Date

1/31/18

Signature of Authorized Officer of the Corporation

SIGN DOCUMENT HERE



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

February 02, 2018 12:43 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

