## 121000200811

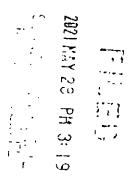
(R	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	:

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## **COVER LETTER**

Division of Co					
SUBJECT: TOJINS	ROOFING LLC				
30001.CT		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter	_			
	Processing Departme	nt			
	<u> </u>	Name of Person	<del></del>		
			-	2021 MAY 28	
		Firm/Company		YAK	
	1450 Vassar	St		28	,
		Address		3 PM 3:19	7
	Reno, NV 89502			. 19	
	returndocs@inca	City/State and Zip Code		,	
		to be used for future annual report notifi	cation)		
For further information of	concerning this matter, please c	all:			
Processing Departm	ent	at ( 800 , 638-2320			
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing I Certificate of Certified Cop (additional copy	Status &	
Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	tions		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TO	JINS ROOFING, LLC	
(Name of the Limited Liab (A Flori	ility Company as it now appears on or da Limited Liability Company)	or records.)
The Articles of Organization for this Limited Liability Florida document number L21000200811	Company were filed on 04/29/2	21 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
	TOJIN'S, LLC	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		70 4
(Principal office address MUST BE A STREET ADD	ORESS)	<u> </u>
		- 111
		الم الله الله الله
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
	•	
B. If amending the registered agent and/or reg		records, enter the name of the i
registered agent and/or the new registered office ad	dress here:	
Name of New Registered Agent:		
N D 1 1007 A 11		
New Registered Office Address:	Enter Florida str	vet address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> \_ 🗆 Add □ Remove ☐ Change \_ Add ☐ Remove []Change : □Àdd Remove Ġ ☐ Change □ Add □ Remove ☐ Change  $\square$  Add \_□ Remove ☐ Change \_□ Add \_□ Remove ☐ Change

Business Purpose: GENERAL CLEA			
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Tective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or other. If the date inserted in this block does not meet the applicable statutory file.	(optional) more than 90 days after filing.) Puling requirements, this date wil	ursuan 11 noi	t to 605.0; he listed
eument's effective date on the Department of State's records.	ing requirements, this date was	11 1100	oc noted
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on	the	earlier
ted $0.5/19/21$ .			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00