## 22000238572

(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAiL
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

oun rece.		TY HOME IMPOVEMENT I	.LC	
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Theodore Williams		
		Name of Person		
		FirnvCompany		
296 East 48th Street				
		City/State and Zip Code		
		ewilliams1983@gmail.com to be used for future annual repor	t notification)	
For further information c	oncerning this matter, please co		( nonneadon)	
Theodore Williams		904 450-291	9	
Name o	f Person	at ()	lytime Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &	
Mailing Addres Registration S	Section	Street Addres Registration	Section	
Division of C	orporations	Division of	Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T&D INTERGITY	HOME IMPOVEMENT L	LC	
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability C	ompany were filed on	05/23/2022	and assigned
Florida document numberL22000238572	·		
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ited liability company he	ere:	
Round Table Roof Repairs & Remodelin	ng LLC		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the c	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
• • •	<del></del>	··	
<u>Principal office address MUST BE A STREET ADDR</u>	<u>(ESS)</u>	<del></del>	
			. •
Enter new mailing address, if applicable:			· 
Mailing address MAY BE A POST OFFICE BOX)			
			1
	<del> </del>		•
3. If amending the registered agent and/or registered	d office address on our r	ecords, enter the n	ame of the new regist
gent and/or the new registered office address here:		,	-,
			•
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	
		, Florida	
<del></del>	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			□Add
		·	□ Remove
			□Change
<del></del>			□ Add
			□ Remove
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			□Change
		□Add	
		□Remove	
			□ Change

Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after ord is filed.	_
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Dated <u>293-14</u>	
The form dellaring	
Signature of a member or authorized representative of a member	
Theodore Williams	