L06000028327

		•
, (Red	uestor's Name)	
(Add	Iress)	,
(Add	iress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
	·	

Office Use Only



100241890361

11/19/12--01021--006 **55.00

CLINE NOV 20 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Miami Roofing LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andrew M. Malahoo

Name of Person

South Miami Roofing LLC

Firm/Company

6800 SW 40th Street, Suite 668

Address

Miami, FL 33155

City/State and Zip Code

andrew@southmiamiroofing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew M. Malahoo

305₉₁₇₋₃₆₄₅

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Fee; Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South Miami Roofing LLC		
(Name of the Limited Lial (A Flo	bility Company as it now appears on our rida Limited Liability Company)	records.)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
The Articles of Organization for this Limited Liabil	ity Company were filed on 03/17/200	of and assigned
Florida document number L06000028327		
Tronds dovinion number	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited lighility company here:	
A. If antending name, enter the new name of the	mined nabinev company nere.	
The new name must be distinguishable and end with the	woods (Vinciand Linkilla, Commun.) the	designation "I I C" on the abbrariation
"L.L.C."	e words Limited Liability Company, the	resignation LLC of the appreviation
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	The state of the s
Enter new mailing address, if applicable:		-n-71 -72
(Mailing address MAY BE A POST OFFICE BOX	AUDA	
	<u> </u>	रूप हो
		
B. If amending the registered agent and/or r	egistered office address on our reco	ords, enter the name of the new
registered agent and/or the new registered office		and the mark of the flew
Name of New Registered Agent:		
New Registered Office Address:	27 4 273	To advant out to an
	Enter Flori	da street 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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR - Manager

MGRM = Managing Member **Address Type of Action Title** Name Todd A. Knapp PO Box 320745 **MGR** Cocoa Beach, FL 32932 Remove Remove Remove

D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· · · · ·	
ated Nov	vember 5 , , , , 201/2
	Julillen
	Signifure of a member or authorized representative of a member
	Andrew M. Matahoo Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE