# 106000071573

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# COVER LETTER

	egistration Sec ivision of Corp			
CUBICOT	НИНАСН Н			
SUBJECT	`•		ited Liability Company	
The enclos	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspor	ndence concerning this matter	to the following:	
		KENNETH J ROSS		
			Name of Person	
		HUHACH ROHA, LLC		
			Firm/Company	
		7450 GRIFFIN ROAD #2	10	
			Address	
		DAVIE, FL 33314		
		<del> </del>	City/State and Zip Code	
		streamlinetitleservices@yal		
		E-mail address: (	to be used for future annual report notific	cation)
For further	information co	ncerning this matter, please ca	all:	
KENNET	H J ROSS		954 439-4655 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for the	e 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

HUHACH ROHA, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/19/2006 and assigned Florida document number \_\_L06000071573 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

### 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

Page 1 of 3

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Remove
			□ Change
			Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			☐ Remove
			☐ Change
			☐ Remove
			Change
			OF STATE
			2) CONTRACTOR

	ownership percentage of the company:	
KENNETH J. ROSS - CU	RRENT OWNERSHIP % - 20%	
KENNETH J. ROSS - NE	W OWNERSHIP % - 15%	
THOMAS R. HANNA - C	CURRENT OWNERSHIP % - 80%	
THOMAS R. HANNA - N	IEW OWNERSHIP % - 85%	
<del></del>		
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f an effective date is listed, the date r <b>Note:</b> If the date inserted in this document's effective date on the	·	ments, this date will not be listed a
e record specifies a delay The 90th day after the r	ed effective date, but not an effective time, at ecord is filed.	: 12:01 a.m. on the earlier
Dated	, 2017	
	Signature of a member or authorized representative of a mem	iber and war pro-
	Typed or printed name of signer	
	Page 3 of 3	2: 2: TATE

Filing Fee: \$25.00