

# L06000075368

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

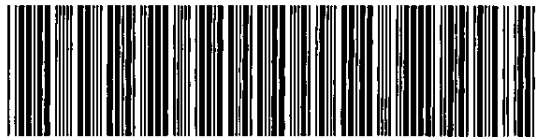
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300137653803

11/10/08--01006--023 \*\*55.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 NOV 10 PM 2:54

J. BRYAN  
NOV 12 2008  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A-1 Quality Siding Co, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

William Boram  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

4607 W. Jackson St. #3  
(Address)

Pensacola, FL 32506  
(City/State and Zip Code)

For further information concerning this matter, please call:

William Boram at (850) 777-9214  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 NOV 10 PM 2:54

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

A-1 Quality Siding Co, 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 07/27/2006 and assigned  
Florida document number L 06000075368

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 end with 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)

P.O. Box 3355  
Pensacola, FL 32516

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)

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	William Boram	P.O. Box 3355 PENSACOLA, FL 32516	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MATT Carley	P.O. Box 3355 PENSACOLA, FL 32516	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Thomas Buchanan	P.O. Box 3355 PENSACOLA, FL 32516	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Brian Buchanan	P.O. Box 3355 PENSACOLA, FL 32516	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

08 NOV 10 PM 12:54

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Dated 11/06, 2008

William R Boram  
Signature of a member or authorized representative of a member  
William R Boram  
Typed or printed name of signee