

109000021124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

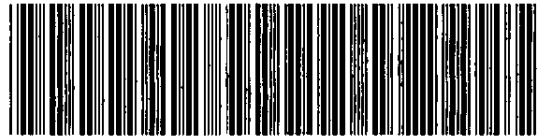
(Business Entity Name)

(Document Number)

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

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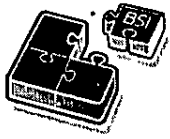
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M. THOMAS

DEC 21 2009

EXAMINER



**BUSINESS  
SUPPORT**

417 Stowe Ave, Suite A, Orange Park, FL 32073

Toll Free: **(800) 373-1833**

Local: **(904) 264-1289**

Fax: **(904) 264-1290**

E-mail: **info@bizsupportinc.com**

**www.bizsupportinc.com**

12/18/2009

Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

RE: Articles of Amendment

Enclosed are the articles of amendment documents for the following client(s).

- Priority Roofing Contractors, LLC

If you have any questions, please contact me at 904-264-1289.

Thank you,

Rhonda Waddill

Enclosures

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**2009 DEC 21 PM 12:37**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PRIORITY ROOFING CONTRACTORS, 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:

RHONDA WADDILL

Name of Person

BUSINESS SUPPORT, INC.

Firm/Company

417 STOWE AVE, SUITE A

Address

ORANGE PARK, FL 32073

City/State and Zip Code

RHONDA@BIZSUPPORTINC.COM

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

For further information concerning this matter, please call:

RHONDA WADDILL

Name of Person

at ( 904 )

264-1289

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**PRIORITY ROOFING CONTRACTORS, 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 MARCH 3, 2009 and assigned  
Florida document number L09000021124.

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)

**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:

RONOTA ALBERTIE

New Registered Office Address:

7965 AMANDAS CROSSING DR W

*Enter Florida street address*

JACKSONVILLE

, Florida

32244

*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.*

*Ronota Albertie*  
**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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JOSHUA L ALBERTIE	7965 AMANDAS CROSSING DR W JACKSONVILLE FL 32244	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	RONOTA ALBERTIE	7965 AMANDAS CROSSING DR W JACKSONVILLE FL 32244	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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 TALLAHASSEE, FLORIDA

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

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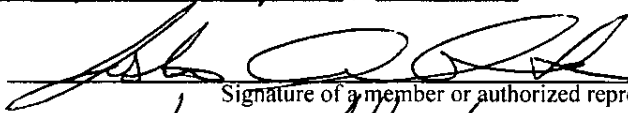
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Dated 12/18/2009

  
 Signature of a member or authorized representative of a member  
Joshua Albertie  
 Typed or printed name of signee