## Division of Corporation Florida Department of State

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ECOSAFE INSULATION OF FLORIDA, LLC

Certificate of Status	0
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**EXAMINER** 

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EMPIRE CORP KIT

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECOSAFE INSULA	TION OF FLOR	IDA LLC	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appea ted Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Comp	oany were filed on	6-03-2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	<u> </u>	
The new name must be distinguishable and end with the words "L.L.C."	I imited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	<u> </u>	<u> </u>
			S S
			P I
Enter new mailing address, if applicable:			Sin or I
(Mailing address MAY BE A POST OFFICE ROX)			<del>~~</del> <del>≥ r</del> r
,		·	<u> </u>
		•	RATE
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on a <u>chere:</u>	our records, <u>enter t</u>	testame of the new
Name of New Registered Agent:			
New Registered Office Address:			
TOTAL TOMORDON SIZE OF TAXABLE VALUE OF TAXABLE OF TAXA	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

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## H0900020232L

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 = Man MGRM = M	ager anaging Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	RICHARD HOURANEY	2700 W CYPRESS CREEK ROAD SUITE C101 FORT LAUDERDALE, FL 33309	Add Remove
MGRM	ECOSAFE, INC.	2700 W CYPRESS CREEK ROAD SUITE C101 FORT LAUDERDALE, FL 33309	☑ Add ☐ Remove
	<u> </u>		Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	9 SEP 16 SECRETAR TALLAHASS
			LE E STATE
Dated	SEPTEMBER 16 200	•	<u> </u>
-		IARD HOURANEY or printed name of signee	
		· · · · · · · · · · · · · · · · · · ·	

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