

L09000087040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

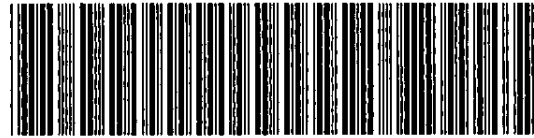
(Business Entity Name)

(Document Number)

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02/07/13--01014--026 **25.00

FILED
13 FEB -7 PM 3:24
DEPT. OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB - 8 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BESSARD 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:

BESSARD, JASMIN

Name of Person

BESSARD ROOFING, LLC

Firm/Company

275 NE 48 STREET

Address

MIAMI FL 33137 US

City/State and Zip Code

MADMAX707@YAHOO.COM

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

For further information concerning this matter, please call:

JOSUE HERCULE

Name of Person

at (**305**) **2007470**

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**

BESSARD ROOFING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
13 FEB -7 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/01/2013 -- ANNUAL REPORT and assigned Florida document number L09000087040.

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)

MIAMI FL 33137 US

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

275 NE 48 STREET

MIAMI FL 33137 US

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: Josue Hercule

New Registered Office Address: 75 NW 167th Street

Enter Florida street address

Miami, Florida 33169

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.

[Signature] 2-5-13
If Changing Registered Agent, Signature of New Registered Agent

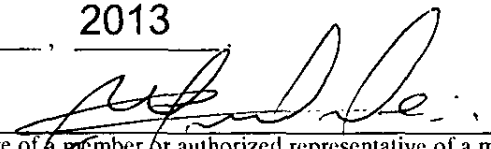
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	BESSARD, JOHNNY	6320 NW MIAMI COURT	<input type="checkbox"/> Add
		MIAMI FL 33150 US	<input checked="" type="checkbox"/> Remove
MGRM	CALIXTE, JEAN C	281 NW 146 STREET	<input type="checkbox"/> Add
		MIAMI FL 33168	<input checked="" type="checkbox"/> Remove
MGRM	GREEN, TERRELLE	3047 NW 45 STREET	<input type="checkbox"/> Add
		MIAMI FL 33147	<input checked="" type="checkbox"/> Remove
MGRM	BESSARD, JASMIN	275 NE 48 STREET	<input checked="" type="checkbox"/> Add
		MIAMI FL 33137	<input 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.)*

Dated 02 05, 2013


Signature of a member or authorized representative of a member

2-5-13

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00