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D. BRUCE

MAR 2 2 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	TOPPS				
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	oondence concerning this matte	r to the following:			
	ALBERT V. HURLEY			-	
		Name of Person			
	Ţ	TOPPS ROOFING LLC			
		Firm/Company			
	3309 NC	3309 NORTHLAKE BLVD SUITE 102			
		Address			
	PALM B	PALM BEACH GARDENS, FL 33403  City/State and Zip Code  buster@hurleyman.com  E-mail address: (to be used for future annual report notification)			l <sup>eg</sup> ti sug
					- 1,1
	E-mail address: (				
For further information	concerning this matter, please			PH 12: 0F STA	
	V. HURLEY, MGRM	at ( 561 )	627-9811	ATE ATE	
Name	or reison	Area Code & Dayun	ne Telephone Numbe	er e	
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 enclose	d) Certified	ate of Status &	osed)
MAILING ADDRESS:		STREET/COUR	IFR ADDRESS:		

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOPPS ROOFING LLC

(Name of the Limited Liabili (A Florida	ty Company as it now are Limited Liability Compa	ppears on our records.)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	05 NOVEMBER 2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	<u>here</u> :	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Co	ompany," the designation "LL	<u> </u>
Enter new principal offices address, if applicable:		Tri:	<b>35 1</b>
(Principal office address MUST BE A STREET ADL	RESS)		0
		<u> </u>	黑 [17]
		10 10 10 10 10	ĕ □
Enter new mailing address, if applicable:			52
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regired registered agent and/or the new registered office ad		on our records, enter the	e name of the ne
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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Christopher J. Carothers	11550 SUNDANCE LANE BOCA RATON, FL 33428	
······································			Add Remove
·····			Add Remove
			Add Remove
			AddRemove
<del>, _</del>			Add Remove
D. If amer	nding any other information, enter ch	ange(s) here: (Attach additional sheets, if necess	eary.)
_			10 10
	17 NOVEMBER	2010	O HAR 19
Dated	attent	V. Huler	GE SEE
	ALB	ERT V. HURLEY, MGRM	· ·
	Ty	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00