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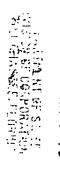
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SEP 2 1 2020 S. YOUNG



## **COVER LETTER**

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations , , ,			
SUBJECT: MUSIC	k Constructio	ng Roofing, U	<u> </u>
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	idence concerning this matter	to the following:	
		•	
	Sean F	P. COX, ESQ.  Name of Person	
	<u>cox la</u>	W, PUC	<del> </del>
	156 E. Bloom	mingdale Ave.	
		FL 33511 City/State and Zip Code	
		City/State and Zip Code  COX   Q W   C-  to be used for future annual report notif	COM
For further information co	ncerning this matter, please ca	<del>1</del> ]]:	
Sean P.	COX, Esq.	at (\$13) 685- Area Code Daytime	-8606 Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S		Street Address: Registration Sec	ction
Division of Co		Division of Cor	porations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP horized person)	Sean P. Cox	156 E. Bloomingdale Ave Brandon, FL 33511	<u>~</u> Xadd
horized Derson		Brandon, FL 33511	□Remove
1 <u>GRM</u>	Mike L. Musick, Jr.	156 E. Bloomingolale Ave	) △ □Add
		Brandon, FL 33511	□Remove
			XChange
			□Add
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		·	□Change

•	
(If an effect Note: If	tedate, if other than the date of filing: 7/30/2020 (optional) (optional) (optional) (ive date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the control of the Department of State's records.
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Signature of a member of authorized representative of a member
	Milliagh Mosich

Filing Fee: \$25.00