L10000069255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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T. HAMPTON
JUL - 6 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREAT SOUTHERN ROOFING LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHARLES CLARKE
Name of Person

GREAT SOUTHERN ROOFING LLC
Firm/Company

6541 SCENIC HWY
Address

PENSACOLA, FL 32504
City/State and Zip Code

CCLARKE74@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES CLARKE at (850) 291-7334
Name of Person — Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

Enclosed is a check for the following amount:

- ☐ $25 Filing Fee
- ☐ $30 Filing Fee & Certificate of Status
- ☒ $55 Filing Fee & Certified Copy
- ☐ $60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GREAT SOUTHERN ROOFING 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 JULY 1, 2010 and assigned Florida document number L10000069255.

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)

_____
_____
_____

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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: CHARLES K. CLARKE

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.

Chal Clk
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

Title	Name	Address	Type of Action
MGRM	CLARKE K. CHARLES	6541 SCENIC HWY PENSACOLA, FL 32504	☐ Add ☒ Remove
MGRM	CLARKE M. HILLARY	6541 SCENIC HWY PENSACOLA, FL 32504	☐ Add ☒ Remove
MGRM	CHARLES K. CLARKE	6541 SCENIC HWY PENSACOLA, FL 32504	☒ Add ☐ Remove
MGRM	HILLARY M. CLARKE	6541 SCENIC HWY PENSACOLA, FL 32504	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

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Dated JUNE 30, 2010.

Signature of a member or authorized representative of a member

CHARLES CLARKE
Typed or printed name of signee

Filing Fee: $25.00