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(Re	questor's Name)	
DA)	dress)	
(Ad	dress)	
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COVER LETTER

TO: Registration Section Division of Corpor		
SUBJECT: P	latinum Roofing of NW Florida	I LLC
The enclosed Articles of Am	nendment and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
	Knader Daoud Name of Person	
		_
	Platinum Roofing of NW Florida	$\Gamma\Gamma$
	Firm/Company	
	102 W Edney Avenue	
	Address	
	Crestrick FL 32536	
-	CVESTVICW FL 32536 City/State and Zip Code Cdaoud @ earthlink . Net E-mail address: (to be used for future annual report notification)	
For further information conc	cerning this matter, please call:	
Khader D Name of Pe	ound at (FSD) 758 - 6283 erson Area Code Daytime Telephone Number	
Enclosed is a check for the fo	following amount:	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed)	of Status & opy

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

Platinum Rooting of	NW Florida	LLC
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our record [Liability Company]	(<u>s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000070231</u> .	y were filed on 07/02	2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent:		SEC. E. AHASChe name of the new s, entercthe name of the new s, entercthe part 10: 50
New Registered Office Address:	Enter Florida street addre	NS .
	. F I	orida
	Cuy	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 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.

N/A

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
AMBR	Chad Ray Baumler	901 GEORGIA ST	[F Add
			Remove
			Change
			□ Remove
			Change
			Add
		Remove	
			Change
			🖸 Add
			□ Remove
		Change	
			Add
		☐ Remove	
			☐ Change
			□ Add
			Remove
			☐ Change

, , , , , , , , , , , , , , , , , , ,	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing: 07/08/2019 (optional) Getive date is listed, 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)(b) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	July 8th 2019
	Signature of a member of authorized representative of a member
	Khader Daoud Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00