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S. HAWKES

AUG 17 2010

EXAMINER

## **COVER LETTER**

	gistration Sec vision of Corp				
SUBJECT:	C	OAST TO COAST F	ROOFING OF TAMPA,	LLC	
Name of Limited Liability Company					
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
			TIMOTHY YOUNG		
	Name of Person				
		TWY ROOFING, LLC			
	Firm/Company				
		730	7302 LOGHOUSE ROAD		
			Address		
	PLANT CITY, FL 33565				
		City/State and Zip Code			
		E-mail address: (1	o be used for future annual report notific	cation)	
For further i	nformation co	oncerning this matter, please c	all:		
	TIMO	THY YOUNG	at (_813 )8	341-2678	
	Name of	Person	Area Code & Daytime Telephone Number		
Enclosed is	a check for th	e following amount:			
\$25.00 F		\$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)	
		NG ADDRESS: ation Section	STREET/COURIE Registration Section		

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

COAST TO COAST ROOFING OF TAMPA, 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 Liabi	lity Company were filed on	08/09/2010	_ and assigned
Florida document number L1000008369	<del>97</del> .		TO AU
This amendment is submitted to amend the following	-	HASSE	FILED PH
A. If amending name, enter the new name of th	e limited liability company here:	inc	유 그 🙃
Т	WY ROOFING, LLC	F-0	<u> </u>
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company	," the designation "	or <b>R</b> abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	1DDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		r records, <u>enter the</u>	name of the new
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, 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>	Name	<u>Address</u>	Type of Action	
			Add	
			Remove	
			Remove F Add Remov	
		<del></del>	Ada Ada Remote	
			A Remote	
		<u> </u>		
	<del> </del>			
			∏Add	
			Remove	
			AddRemove	
D. Ifaman	ding any other information of	nter change(s) here: (Attach additional she	ate if vacassam)	
D. II amen	uning any other information, e	inter change(s) here. (Anden additional shee	eis, y necessary.)	
Dated	AUGUST 11	. 2010 .	<del></del>	
Dated	<u>~</u>	+ 300		
	Signature	of a member or authorized representative of a me	ember	
		TIMOTHY W. YOUNG		
		Typed or printed name of signee	7	

Page 2 of 2

Filing Fee: \$25.00