# L10000 176 fos

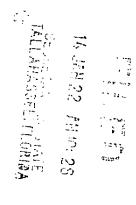
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
	ŕ	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
i.		
		Ì

Office Use Only



600253532896

01/22/14--01024--021 \*\*25.00



J. Shivers JAN 27 200

### \* COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

WKL Roofing, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Stephen R. Ponder, Esq.

Name of Person

Van Houten, Ponder & Hahl, PA

Firm/Company

114 S. Palmetto Avenue

Address

Daytona Beach, FL 32114

City/State and Zip Code

VHPLAW@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen R. Ponder

...386、257-1777

Name of Person

Area Code

Daytime Telephone Number

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 enclosed)

□ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

#### **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

WKL Rooting, LLC		
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number <u>L10000126805</u>	ity Company were filed on December 10, 2010 and as	signed
This amendment is submitted to amend the following	g:	
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	s "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 AL	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	0	
	· .	
B. If amending the registered agent and/or r registered agent and/or the new registered office a	registered office address on our records, enter the name address here:	of the ne
Name of New Registered Agent:	# 15 C	******
New Registered Office Address:	75. 75	e e e
	Enter Florida street address Florida	, , , , , , , , , , , , , , , , , , ,
	City Zip Code	***

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.

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or
Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Walter Lewis	1821 Holsonback Drive	_ <b>≡</b> Add
		Daytona Beach, FL 32117	7 _□ Remove
			_
		***************************************	_□ Add
			_□ Remove
			 □ Add
			_□ Remove
			- 4
			□ Add □ Remove
			So So
			_□ Add
			_□ Remove
			-
	<del> </del>		_□ Add
			□ Remove

	· ·
	10-10-10-11
ffective d	ate, if other than the date of filing: (optional) date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
	locument is filed by the Florida Department of State)
he date this	

Page 3 of 3

Filing Fee: \$25.00

14 JAN 22 MI In: 26