

L11000041732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

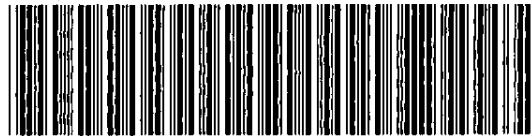
(Business Entity Name)

(Document Number)

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11 SEP 27 AM 8:08

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 SEP 27 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

SEP 27 2011

EXAMINER

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **Storm Construction, 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:

James B. Moffatt

Name of Person

Firm/Company

Post Office Box 14442

Address

Bradenton, FL 34280

City/State and Zip Code

barrymoffatt@ymail.com

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

For further information concerning this matter, please call:

James B. Moffatt

Name of Person

at (**941**)

730-3465

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**

Storm Construction, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on April 7, 2011 and assigned
Florida document number L11000041732.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Storm Roofing & Repair, LLC

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:

11020 Bristol Bay Drive, Apt. 506

(Principal office address MUST BE A STREET ADDRESS)

Bradenton, FL 34209

Enter new mailing address, if applicable:

Post Office Box 14442

(Mailing address MAY BE A POST OFFICE BOX)

Bradenton, FL 34280

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:

James Barry Moffatt

New Registered Office Address:

11020 Bristol Bay Drive, Apt 506

Enter Florida street address

Bradenton

Florida

34209

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.

James Barry Moffatt
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

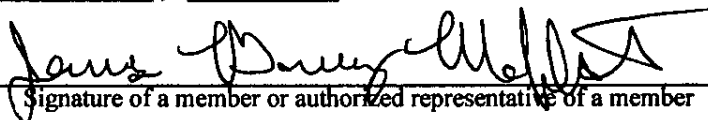
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Moffatt, James B	7707 Portosueno Avenue Bradenton, FL 34209	☐ Add ☒ Remove
MGRM	Moffatt, James B	11020 Bristol Bay Drive, Apt 506 Bradenton, FL 34209	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

N/A

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11 SEP 27 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated 9-20, 2011.


Signature of a member or authorized representative of a member

James B. Moffatt

Typed or printed name of signee