L11000066448

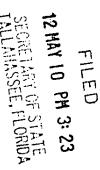
(Re	equestor's Name)				
(Address)					
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
. (Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



100234743891

05/10/12--010/7--023 **25.00



C. LEWIS

MAY 1 1 2012

EXAMINER

COVER LETTER Registration Section **Division of Corporations** The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Ferrigno, Neil American Home Tech, Inc. Firm/Company 3802 W. Granada St. Address Tampa FL 33629 City/State and Zip Code neilf a antroofing com E-mail address: (to be used for future annual report Motification) For further information concerning this matter, please call: Neil Ferrigno at (813) 506.7324 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

FILED 12 MAY 10 PM 3: 23

American			UG	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Name of the Limited Lia (A Flo	bility Company as rida Limited Liabili	it now appear ty Company)	s on our reco	ords.)
The Articles of Organization for this Limited Liabil Florida document number <u>L 11 0000 66</u>		e filed on <u>02</u>	<u>10- 21</u>	O 12 and assigned
This amendment is submitted to amend the followir	ng:			
A. If amending name, <u>enter the new name of the</u>	limited liability	company her	e:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited L	iability Compa	ny," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:			
Principal office address MUST BE A STREET A	DDRESS)			
Francisco de descritore de la constitución de la co				
Enter new mailing address, if applicable: <i>(Mailing address MAY BE A POST OFFICE BO)</i>	-			
	 -			
B. If amending the registered agent and/or registered agent and/or the new registered office		address on o	ar records,	enter the name of the new
Name of New Registered Agent:			_	
New Registered Office Address:				
	Enter Florida street address			
_	Cit	<u> </u>	, Flo	orida
	Cit	y		Lip 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 = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Ferrigno, Vincent R	828 Baisolen Road Jackson ville, FL 33218	☐ Add ☐ Remove
MGRM	Lapointe, Jeff	106 Spinnaker Circle Kingsland, GA 3154B	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)
			FILED 12 HAY IO PH 3: SECRETARY OF ST ALLYAINASSEE, FLC
Dated	lay outh, 20	71.1	1 3: 23 FLORIDA
	Signature of a membe	*or authorized representative of a member	
		Clwis Neumann d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00