

| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | ess) State/Zip/Phone #) WAIT MAIL Mess Entity Name) ment Number) Certificates of Status |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
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| Special Instructions to | Filing Officer: | - |
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Office Use Only



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COVER LETTER

| TO: Registration Division of | n Section Corporations | | | |
|---|---|-------|--|--|
| | te Mobile Home Roofing LLC | | | |
| SUBJECT:Name of Limited Liability Company | | | | |
| The enclosed Articles | of Amendment and fee(s) are submitted for filing. | | | |
| Please return all corre | espondence concerning this matter to the following: | | | |
| | Chris J Flaim | | | |
| | Name of Person | | | |
| | Absolute Mobile Home Roofing LLC | | | |
| | Firm/Company | | | |
| | 16927 Waterline Road | | | |
| | Address | lus & | | |
| | Bradenton, FL 34212 | | | |
| | City/State and Zip Code | | | |
| | chris@absoluteroofingofflorida.com | | | |
| | E-mail address: (to be used for future annual report notification) | | | |
| For further information | on concerning this matter, please call: | | | |
| Mark A Flaim | 727 542-9438 at () | | | |
| Nan | ne of Person Area Code Daytime Telephone Number | | | |
| Enclosed is a check fo | or the following amount: | | | |
| \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

| Absolute Mobile Home Roofing | LLC | | | |
|--|---|------------------------------------|----------------|--|
| (Name of the Lim | ited Liability Company as it now a (A Florida Limited Liability Comp | uppears on our records.) pany) | | |
| The Articles of Organization for this Limited | Liability Company were filed o | on June 27, 2011 | _ and assign | ied |
| Florida document number L11000073909 | ······································ | | | |
| This amendment is submitted to amend the fo | lowing: | | | |
| A. If amending name, enter the new name | of the limited liability compa | ny here: | | |
| he new name must be distinguishable and contain the | words "Limited Liability Company," | the designation "LLC" or the abbre | viation "L.L.C | |
| Enter new principal offices address, if appli | cable: | | | 9 |
| Principal office address MUST BE A STREET ADDRESS) | | | | 35. |
| | | | AUG | 2 <u>2</u> |
| | | | -9 | - 3 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| Inter new mailing address, if applicable: | | | 2 | 7 Y C |
| Mailing address MAY BE A POST OFFICE BOX) | | | ö | AN AN |
| | | | <u></u> | - 10° E |
| 3. If amending the registered agent and egistered agent and/or the new registered of | | s on our records, <u>enter th</u> | e name of | the nev |
| Name of New Registered Agent: | Chris J Flaim | | | ···· |
| New Registered Office Address: | 16927 Waterline Road | | | |
| | Ente | er Florida street address | | |
| | Bradenton | , Florida ³⁴²¹ | 2 | |
| | City | , | Ziv 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.

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> | Name | <u>Address</u> | Type of Action |
|---------------|---------------|----------------------------|----------------|
| MGR | June E Flaim | 923 Fairwaycove Lane, #206 | |
| | | Bradenton, FL 34212 | ■ Remove |
| | | | ☐ Change |
| MGR | Mark A Flaim | 923 Fairwaycove Lane, #206 | Add |
| | | Bradenton, FL 34212 | ■ Remove |
| | | | Change |
| MGR | Chris J Flaim | 16927 Waterline Road | Add |
| | | Bradenton, FL 34212 | ☐ Remove |
| | | | Change |
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| ctive date, if other than the d | ate of filing: | use to date of filing o | c more than 90 days aft | tional) er filing) Pursuant to | s 605 i |
| e: If the date inserted in this bloc | k does not meet the app | licable statutory fi | ling requirements, th | us date will not be | liste |
| iment's effective date on the Dep | artment of State's record | ds. | | | |
| ecord specifies a delayed (| effective date thut r | not an effectiv | e time lat 12:01 | am on the ea | arlie |
| ne 90th day after the recor | | | J,, D. 12.01 | | J |
| August 7 | 2018 | | | | |
| August 7, | | · | | | |
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| // // / | A.C.IN ignature of a member or au | | | | |

Page 3 of 3

Filing Fee: \$25.00