

L12000099596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

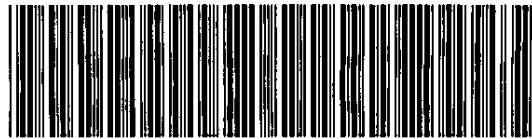
(Document Number)

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2016 SEP 16 P 2:40

SHERRILL J. COLE  
TALLAHASSEE, FLORIDA

2016 SEP -6 PM 12:54

TALLAHASSEE, FLORIDA

SEP 14 2016

D. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 9, 2016

GARY BOYD  
5 SUNDROP WATCH  
ORMOND BEACH, FL 32174

SUBJECT: ROOF-BRIGHT OF FLORIDA, LLC  
Ref. Number: L12000099596

We have received your document for ROOF-BRIGHT OF FLORIDA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 016A00019223

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2016 SEP 16 P 2:40  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ROOF-BRIGHT OF FLORIDA

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:

GARY BOYD

Name of Person

ROOF BRIGHT OF FLORIDA

Firm/Company

5 SUNDROP WATCH

Address

ORMOND BEACH, FL 32174

City/State and Zip Code

roofbrite@aol.com

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

For further information concerning this matter, please call:

GARY BOYD

Name of Person

at ( 386 )

Area Code

788-4538

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)

(ALREADY PAID)

### 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

2016 SEP 19 PM 4:29  
TALLAHASSEE, FLORIDA

2016 SEP 16 PM 2:40  
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

\_\_\_\_\_  
(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 Liability Company were filed on 8/2/12 and assigned  
Florida document number L12000099596

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "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 ADDRESS)

5 Sundrop Watch  
Ormond Beach, FL 32174

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

**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:

GARY BOYD

New Registered Office Address:

5 Sundrop WATCH

Enter Florida street address

Ormond Beach

City

Florida

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 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.

GARY BOYD

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anna Boyd	5 Sundrop Watch Ormond Beach FL 32174	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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ALAMOSA, FLORIDA

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

Remove

Thomas Shannon

Robert Sarricchio

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2016 SEP 16 PM 2:40  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 9/15/16 (optional)

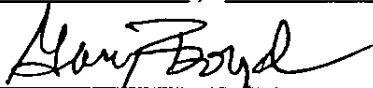
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Sept. 15, 2016



Signature of a member or authorized representative of a member

GARY BOYD

Typed or printed name of signee