

FROM

Division of Corporations

(KTRU) NOV 11 9:51/5:51

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L12000115820

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H12000266871 3)))



H120002668713ABCO

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : DAVID TORCHIN, C.P.A., P.A.

Account Number : I19990000007

Phone : (954) 472-3124

Fax Number : (954) 323-6301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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2012 NOV -8 AM 9:05
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SECRETARY OF STATE

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IROOFING, LLC

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Corporate Filing Menu

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J. BRYAN

NOV -9 2012

EXAMINER

H12 000 266871 3

FROM

(THU) NOV 8, 2012 9:52/ST. 9:51/No. 9160061169 P 2

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

iroofing, llc

(Same 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 9-10-12 and assigned
Florida document number L12000115820

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 end with the words "Limited Liability Company," the designation "LLC," or the abbreviation
"LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1830 South Ocean Drive #4209

Hallandale, FL 33009

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1830 South Ocean Drive #4209

Hallandale, FL 33009

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:

Oded Shemla

New Registered Office Address:

1830 South Ocean Drive #4209

Enter Florida street address

Hallandale

Florida 33009

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.

If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

FROM

(THU) NOV 8 2012 9:59/ST. 9:51/No. 9160081100 P 9

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

112 000 266 871 3

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	John Purland	2234 N Federal Hwy # 349	☐ Add
		Boca Raton, FI 33431	☒ Remove
MGRM	Applosophy, LLC	1830 S Ocean Drive	☐ Add
		Hallandale, FI 33009	☒ Remove
MGRM	Oded Shemla	1830 S Ocean Drive	☒ Add
		Hallandale, FI 33009	☐ Remove
MGRM	Shai Cohen	1830 S Ocean Drive	☒ Add
		Hallandale, FI 33009	☐ Remove
MGRM	Daniel Meridor	318 E 9th Street # 14	☒ Add
		New York, NY 10003	☐ Remove

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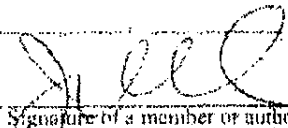
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated



Signature of a member or authorized representative of a member

John Purland

Typed or printed name of signee

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Filing Fee: \$25.00

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