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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
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Office Use Only



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COVER LETTER

TO: Registration Sect Division of Corp		
SUBJECT: AND	Name of Limit	ODF REPOIT LLC ited Liability Company
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.
Please return all correspond	dence concerning this matter	to the following:
		Soe Hiles Name of Person
		Firm/Company
	P.0	Box 250742
	Hol	CityState and Zip Code
	branch r E-mail address: (1	to be used for future annual report notification)
For further information cor	ncerning this matter, please ca	all:
Joe Name of I	Hiles	at (386) 5151273 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

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ARTICLES OF O	RGANIZATION W.
OF	$\mathcal{P}_{P}}}}}}}}}}$
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ANTILL DINE REPAIR	Like Angelow
ANYTIME ROOF REPAIR. I	y as it now appears on our records.)
(A Florida Limited Lia	ability Company)
The Articles of Organization for this Limited Liability Company v	vere filed on March 11 2014 and assigned
Florida document number <u>L 140000 41.109</u>	and assigned
Florida document number \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	
Branch Roofing	¿ Renairs LIC
Branch Rooting The new name must be distinguishable and contain the words "Limited Liability	y 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)	
	551 B + 6 - 6 - 6 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -
	231 7th Street # 25074
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Holly Hill FL 32125
Training moureus MATT DE WITOUT OF THE BOTTY	
B. If amending the registered agent and/or registered office ad	Idross on our records, enter the name of the new registered
agent and/or the new registered office address here:	ruress on our records, enter the fiame of the new registered
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	
	Enter Florida street address
	Plantda

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.

City

Zip Code

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>	Address	Type of Action
			Remove
			□Change
			□ Add
			□Remove
			□Change
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F ffoot	ive date, if other than the date of filing:(optional)
lf an eff <u>Note:</u>	ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
e recor rd is fi	d 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 led.
Dated	12/30 Joe Mile Signature of a member or authorized representative of a member
	(Soc 1:6
	Signature of a member or authorized representative of a member
	Joe D. Hiles Typed or printed name of signee