Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Number : I19990000255

: (561)844-3700

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

Email Address: MD@GDR-LAW, COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTHERN BUILDING PRODUCTS LLC

Certificate of Status	,	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF SOUTHERN BUILDING PRODUCTS LLC (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 12/23/2014 assigned Florida document number L14000195573 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: JOHN C. BYERS Name of New Registered Agent: 2590 N. KINGS HWY New Registered Office Address: Enter Florida street address FT. PIERCE

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 filled 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

X If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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	Address	Type of Action
MGR	ROGER DELPAPA	2590 N. KINGS HWY	
		FT. PIERCE, FL 34951	■ Remove
			☐ Change
MGR	JOHN C. BYERS	2590 N. KINGS HWY	■ ∧dd
		FT. PIERCE, Pl. 34951	Ö Remove
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Gary Dytrych & Ryan (((H160000804343)))

Tr autending any other inform	nation, enter change(s) here: (Attach additional sheets, if	necessary.)	
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Effective date, if other than t (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	he date of filing: nust be specific and cannot be prior to date of filing or more than 90 day block does not meet the applicable statutory filing requirement Department of State's records.	(optional) s after filing.) Pursuant is, this date will not b	ය 605.0207 (3) e listed as the
the record specifies a delay) The 90th day after the r	red effective date, but not an effective time, at 12: ecord is filed.	:01 a.m. on the e	earlier of:
Dated March 23	2016		
The P	01		
X per	Signature of a member or authorized representative of a member	C3	
JOHN C. BYERS	·		~~ \$1.5 2
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	Page 3 of 3		in
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