

L15000000337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

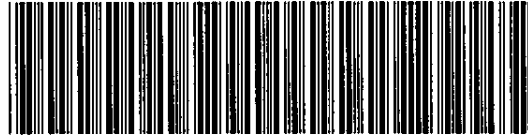
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JAN 13 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 26 2015

Jan 9th, 2015

To whom this may concern,

As per requested from form downloaded this will serve as a cover letter.

Please contact the following for any matters concerning the amendment:

Frederic Cadieux
500 W. Airport Blvd.
Suite 1105
Sanford, FL
32773

Tel: 407-668-2013

Sincerely

A handwritten signature in black ink, appearing to read 'F. Cadieux', with a long horizontal stroke extending to the right.

Frederic Cadieux

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STORM RESTORATION LLC
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:

FREDERIC CADIEUX

Name of Person

STORM RESTORATION LLC

Firm/Company

500 W. AIRPORT BLVD. #1105.

Address

SANFORD, FL 32773

City/State and Zip Code

CADPRED457@GMAIL.COM.

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

For further information concerning this matter, please call:

FREDERIC CADIEUX

Name of Person

at

(407)

Area Code

668-2013

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)

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**

STORM RESTORATION 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 JAN 2, 2015 and assigned Florida document number L15000000337.

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 "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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida
City

15 JAN 13 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	FREDERIC CADIEUX	500 W. AIRPORT BLVD.	<input checked="" type="checkbox"/> Add
		#1105	<input type="checkbox"/> Remove
		SANFORD, FL, 32773	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF PLANT
TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JAN 9th., 2015.



Signature of a member or authorized representative of a member

FREDERIC CADIEUX.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13670
15 JAN 13 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA