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(R€	equestor's Name)	
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(City/State/Zip/Phone PICK-UP WAIT (Business Entity Nam (Document Number)	MAIL	
(Bı	usiness Entity Name)
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Certified Copies	Certificates o	f Status
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COVER LETTER

	Registration Sec Division of Corp		· · · · · · · · · · · · · · · · · · ·	
eun le <i>c</i> e		OFING SERVICES LLC		
SUBJEC	1:	Name of Limi	ited Liability Company	
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspon	ndence concerning this matter	to the following:	
		RAMIRO BUCIO		
			Name of Person	
		BUCIO ROOFING SERV	ICES LLC	
			Firm/Company	
		5101 N 30TH ST		
			Address	
		tampa fl 33610		
			City/State and Zip Code	·
		rbucio@tampabay.rr.com		
		E-mail address: (to be used for future annual report notifi	cation)
For furthe	er information co	oncerning this matter, please ca	all:	
RAMIRO	O BUCIO		813 918-5855 at ()	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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

BUCIO ROOFING SERVICES LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company florida document number L15000070912	were filed on 04/22/2015	and assigned
this amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
RB HAULING SERVICES LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."
nter new principal offices address, if applicable:	5101 N 30TH ST	
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered or egistered agent and/or the new registered office address her		26 J
Name of New Registered Agent:		
		88 = 4
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code

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.

New Registered Agent's Signature, if changing Registered Agent:

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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ective date, if other than th	e date of filing	05/08/2015		(optional)		_	7
n effective date is listed, the date motes: If the date inserted in this b	ust be specific and slock does not m	cannot be prior to eet the applicab	date of filing or m	ore than 90 days	after filing.) <u>Pü</u> rsüan will not	t to 605.0 be listed)20 d ā
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record specifies a delaye	ed effective d	ate, but not a	an effective t	ime, at 12:	01 a.m.	on the	earlie	r c
The 90th day after the re	cord is filed.							
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	, 4. / /	/ (/ (/)						
2 /07/701/	Signature of a n	nember or authoriz	red representative	of a member				

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Filing Fee: \$25.00