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(Re	equestor's Name)	
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## **COVER LETTER**

TO:	Registration Sec Division of Corp		,	
CTID	Roofmaster:	S SWFL LLC		
300	JEC1:	Name of Lim	ited Liability Company	
The e	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Gordon Ladwig		
			Name of Person	
			Firm/Company	
		19100 Cypress View Drive	2	
			Address	
		Ft. Myers, FL 33967		
		northside@tds.net	City/State and Zip Code	
		E-mail address: (	to be used for future annual report not	ification)
For fi	arther information co	oncerning this matter, please ca	all:	
Gord	on Ladwig		608 235-4500 at ()	
•	Name of	Person	Area Code Daytin	ne Telephone Number
Enclo	osed is a check for th	e following amount:		
<b>□</b> \$	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

Roofmaters SWFL LLC		
( <u>Name of the Limited Li</u> (A Fi	<u>ability Company as it now appears on our record</u> orida Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liabili	ty Company were filed on April 07, 2016	and assigned
Florida document number L16000069499	<u> </u>	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Samson Roofing LLC		
he 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	<b>:</b>	
Principal office address MUST BE A STREET AI		. 62
		273
Inter new mailing address, if applicable:		25
Mailing address MAY BE A POST OFFICE BOX		TO D
naming dataress may be a rost of rice box		15. 15. 15. 15. 15. 15. 15. 15. 15. 15.
		STATE STATE
3. If amending the registered agent and/or r	egistered office address on our records	
egistered agent and/or the new registered office		
Name of New Registered Agent:		
New Registered Office Address:		
Trem registered Office Address.	Enter Florida street addres:	S
	Fle	orida
<del>-</del>	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 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 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
AMBR	Nikolas J Ladwig	19100 Cypress View Drive	
		Fort Myers, FL 33967	<b>■</b> Remove
			☐ Change
		<del>.</del>	🗖 Add
			☐ Remove
			□ Change
			Add
			Remove
			☐ Change
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		<del></del>	Add
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		<u>.</u>
five date, if other than the date of fective date is listed, the date must be specifithe date inserted in this block does nent's effective date on the Department.	filing:	(optional) han 90 days after filing.) Pursuant to quirements, this date will not be
		e at 12:01 a.m. on the e
cord specifies a delayed effect 90th day after the record is 1	tive date, but not an effective time filed.	e, at 12.01 a.m. on the t
90th day after the record is t	tive date, but not an effective time filed.	s, at 12.01 a.m. on the c
90th day after the record is i	tive date, but not an effective time	
90th day after the record is t	filed.	THE TOTAL CONTROL OF THE CONTROL OF
90th day after the record is 1 July 20, 2016	filed.	
July 20, 2016	filed.	i member

Filing Fee: \$25.00