

116 0000 84145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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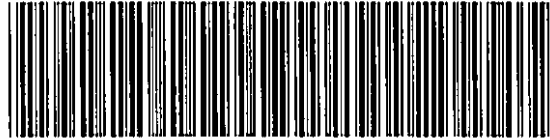
(Business Entity Name)

(Document Number)

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17 OCT 25 AM 10:12

SEALING & STATE
TALLAHASSEE FLORIDA

[Signature]
10/24/17



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: CENTERLINE SOLUTIONS LLC

2. (a) 7103 EAST 6TH AVENUE

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

TAMPA FL 33619

2. (b) 16035 TABLE MOUNTAIN PARKWAY

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

GOLDEN, CO 80403

3. 04/28/2016
Date of filing/registration in Florida

4. L16000084145
Document number

5. (a) DURANT TOM
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

7103 EAST 6TH AVENUE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

TAMPA, FL 33619

(b) Corporation Service Company
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Grace E. Kirby
Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person
Printed or typed name of signer

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.

Grace E. Kirby
Signature of Registered Agent

Corporation Service Company By: Grace E. Kirby, Assistant Vice President

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

"LET IT RAIN SEAMLESS GUTTERS, 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 02/10/2016 and assigned
Florida document number L16000028601.

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

City

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17 OCT 25 AM 11:14
STATE OF FLORIDA
TALLAHASSEE

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>	<u>Address</u>	<u>Type of Action</u>
P/VP	Bryan Tellgren	12412 93rd Ave N Largo FL 33773	<input type="checkbox"/> Add
		President	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P/VP	Kelly Maye	12412 93rd Ave N Largo FL 33773	<input type="checkbox"/> Add
		Vice President	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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