## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000102503 3)))



H200001025033ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : API PROCESSING Account Number : I20110000069

Phone : (954)567-0013

Fax Number : (954)567-3401

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

- Enail Address: Kally & Copiperococcing, Com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MESA ROOFING LLC

•	
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Y SULKER

Electronic Filing Menu

Corporate Filing Menu

Help

► NO.728 #002

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF H20000 103518 3

Mesa Roofing LLC		
(Name of the Limited Liability Company as it now appread (A Florida Limited Liability Company)	ars un our records.)	
The Articles of Organization for this Cimited Liability Company were filed on _	May 23, 2016	and assigned
Florida document numberL16000100181		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company l	<u>jero</u> :	
Mesa Construction LLC		
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the a	hbreviation "L.L.C."
Euter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u></u>	
		<del></del>
		202
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(Maining latteress MAT BEAT OUX CITIES PERS		9
B. If amending the registered agent and/or registered office address on our	records, enter the na	me of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:	<u>.</u>	
New Registered Office Address:	<del></del>	
Enter F	Torida street address	
	, Florida _	
City		Zıp 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

H20000103603 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: Dip 3064

MGR = N $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			☐ Change
		<del></del>	
	<del></del>		□Remove
			☐ Change
	·		UAdd
		URemove	
			Change
	· · · · · · · · · · · · · · · · · · ·		
		. <u></u>	Remove
			□Change
			⊡Add
	<del></del>		□Remove
			□Add
			□ Change

H20050103503 Pro 4004 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_ (optional) E. Effective date, if other than the date of filing: \_\_\_\_ (If an effective date is listed, the time must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated 1 Signature of a member or authorized representative of a member

Filing Fee: \$25,00

Yuset Mesa
Typed or prioted name of signee