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16 OCT 10 AM 8:00

SECRETARY OF STATE TALLAHASSEE. FLORIDA

OCT 11 2016 S. YOUNG SUPPLICIONON OF FILING

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 325353 8112019

AUTHORIZATION :

COST LIMIT : \$(,25.00

ORDER DATE: October 10, 2016

ORDER TIME : 3:56 PM

ORDER NO. : 325353-005

CUSTOMER NO: 8112019

DOMESTIC AMENDMENT FILING

NAME: ECO-LOGICAL ROOFING, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

	gistration Sect vision of Corpe						
SUBJECT:		Roofing, LLC					
SUBJECT.		Name of Lin	nited Liability Company		-		
		mendment and fee(s) are sub lence concerning this matter	·				
		Jo	orge J. Echeandía Gonzále	z			
			Name of Person	·····	_		
		I	Eco-Logical Roofing, LLC				
	Firm/Company				_		
	830 Moonlit Ln.						
	Address				_		
			Casselberry FL, 32707			크 55 CD	
			City/State and Zip Code			6 OCT 10	VIII.
			eandia@ecologicalpr.con		_	<u> </u>	385
For further in	nformation cond	cerning this matter, please ca		Срои с полис в иопу		AH 8:	SSTE, FLORID
Jorge J. Echeandía González		787 at ()	458-1895		: 00	ORIO)	
	Name of Pe	erson	Area Code	Daytime Telephone Numb	xer		ِ بيڪ
Enclosed is a	check for the f	following amount:					
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificosed) Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)		
	B.F. (F. (W)	0.488888					

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

Eco-Logical Roof	•			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	y as it now appears lability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	10/04/2016	and assigned	
Florida document numberL16000184014				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company her	e:		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the des	ignation "LLC" or the ab	obreviation "L.L.C."	
Enter new principal offices address, if applicable:	830 Moonl	it Ln.		
(Principal office address MUST BE A STREET ADDRESS)	Casselberry,	FL 32707	·	ψı.
·			<u> </u>	
	830 Moonl	lit I n		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Casselberry	··· ······		4.0 4.0 4.0
			<u> </u>	コリ
	,		g	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here.		our records, <u>enter</u>	the name of the nev	M.
Name of New Registered Agent:		* /· ··		
New Registered Office Address:	Futer Florid	a street address	<u></u>	
	Enter Florida street address			
4	City	, Florida	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 = N $AMBR = N$	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			Remove
			Change
			Add
			□ Remove
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			Change
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			□ Remove
			Change
			□ Add
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			5 0

D. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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Note:	ive date, if other than the date of filing:	5.0207 (3 ted as th	3)(b) ie
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli 99th day after the record is filed.	er of:	
Dated			
	Signature of a member or authorized representative of a member		
	Signature of a member or authorized representative of a member		
	Jorge J. Echeandía González		

Page 3 of 3

Filing Fee: \$25.00