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Division of Corporations

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From:

Account Name : BAND, GATES, DRAMIS, P.L.

Account Number : I20130000059

Phone

: (941)366-8010

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K. SALY

NOV 23 2016

(((H16000287727 3)) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



STATEWIDE RESTORATION SERVICES II, LLC	
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	pr records.)
The Articles of Organization for this Limited Liability Company were filed on OCTOB	ER 26, 2016 and assigned
Florida document number L16000196752	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability company here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Company," the designa	ation "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 registered agent and/or the new registered office address here:	records, enter the name of the no
Name of New Registered Agent:	
New Registered Office Address:	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

(((H16000287727 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:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	STEVE RIOUX	P.O. BOX 50232	
		SARASOTA, FL 34232	■ Remove
		***	☐ Change
MGR	DOUGLAS NEUHAUS	10730 N.W. 53RD ST	□ Add
		SUNRISE, FL 33351	■ Remove
			Change
			☐ Remove
			☐ Change
			Add SECRETA AHASE
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<u>te:</u> If the date in	other than the date isted, the date must be s serted in this block d re date on the Depart	loes not meet the ap	plicable statutory fi	(opt or more than 90 days afte iling requirements, th	ional) or filing.) Pursuant to 605.0207 is date will not be listed as
	ies a delayed effo after the record i		not an effectiv	e time, at 12:01	a.m. on the earlier of
ted NOVEMBE	R 22	2016			

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