

L17000013658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2018 JUN -4 11:11
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WEATHERLOCK ROOF SYSTEMS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Alan Ross Jr

Name of Person

Weatherlock Roof Systems

Firm/Company

3948 3rd Street South Unit 195

Address

Jacksonville Beach FL 32250

City/State and Zip Code

weatherlocksystem@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gregory Alan Ross

803 5870144
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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**

WEATHERLOCK ROOF SYSTEMS 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 01/17/2017 and assigned
Florida document number L17000013658.

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:

3948 3rd Street South Unit 195

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville Beach FL 32250

Enter new mailing address, if applicable:

3948 3rd Street South Unit 195

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville Beach FL 32250

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:

Gregory Alan Ross Jr

New Registered Office Address:

3948 3rd Street South Unit 195

Enter Florida street address

Jacksonville Beach

Florida

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Gregory Alan Ross Jr	3948 3rd Street South Unit 195	<input checked="" type="checkbox"/> Add
		Jacksonville Beach FL	<input type="checkbox"/> Remove
		ADD	<input type="checkbox"/> Change
AP	Gary Rogers	13720 Old Saint Augustine Rd	<input type="checkbox"/> Add
		Jacksonville, FL 32258	<input checked="" type="checkbox"/> Remove
		REMOVE	<input type="checkbox"/> Change
MGR, CF	Izabel Oliveira	13720 Old Saint Augustine Rd	<input type="checkbox"/> Add
		Jacksonville, FL 32258	<input checked="" type="checkbox"/> Remove
		REMOVE	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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2018 JUN -4 11:11
CLERK OF COURT
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing 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 JUNE 1ST 2018



Signature of a member or authorized representative of a member

GREGORY ALAN ROSS JR MAJORITY MEMBER

Typed or printed name of signee