

L17000064942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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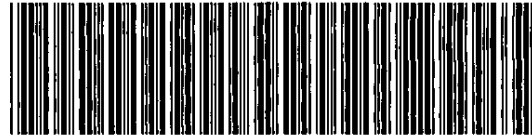
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
17 MAY 30 PM 2:45

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Certified Roof Technology LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shawn J. Safris, Sole Member

Name of Person

Certified Roof Technology LLC

Firm/Company

19779 Boca West Drive

Address

Boca Raton, FL 33434

City/State and Zip Code

msafris@mesafris.com

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

For further information concerning this matter, please call:

Shawn J. Safris

at (973)

953-4866

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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**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: Certified Roof Technology LLC

2. (a) 19779 Boca West Drive

Principal office address of limited liability company:

*(Note: **MUST BE STREET ADDRESS**)*

Boca Raton, FL 33434

(b) 19779 Boca West Drive

Mailing address of limited liability company:

*(Note: **MAY BE POST OFFICE BOX**)*

Boca Raton, FL 33434

March 27, 2017

3. Date of filing/registration in Florida

L17000064942

4. Document number

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

Registered Office Address *(**MUST BE FLORIDA STREET ADDRESS**)*

_____, FL _____

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

_____, FL _____

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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.

Signature of a member or authorized representative of a member

Shawn J. Safris

Printed or typed name of signee

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.

Signature of Registered Agent

State of Florida

Department of State

I certify from the records of this office that CERTIFIED ROOF TECHNOLOGY LLC is a limited liability company organized under the laws of the State of Florida, filed on March 21, 2017, effective March 20, 2017.

The document number of this limited liability company is L17000064942.

I further certify that said limited liability company has paid all fees due this office through December 31, 2017 and that its status is active.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Twenty-seventh day of March,
2017*



Ken DeFries
Secretary of State

Tracking Number: CU4292817925

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