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(R	equestor's Name)
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(C	City/State/Zip/Phone #)
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(В	Business Entity Name)
(D	Occument Number)
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COVER LETTER

Division of Cor	porations		
SUBJECT:K	Thino Rooting Name of Limit	of Jacksonville ited Liability Company	116.
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Name of Person	
	Rhino	Roofing of Jo	x LL
		tribution Ave Wes	1
	_ Jacksonvell	le FL 3229 City/State and Zip Code	56
	E-mail address: (4 tran 89 @ Yaloo co	ication)
For further information c	oncerning this matter, please ca	all:	
Brian Name o	Wachurst Person	at (<u>904</u>) <u>520</u> Area Code Daytimo	- 0757 Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 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:

TO:

Registration Section

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

CT 1/2 1/2

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 Liab	oility Company were filed on 4/7/2017 and assigned
Florida document number <u>[170000783</u>	
This amendment is submitted to amend the follow:	ring:
A. If amending name, enter the new name of th	he limited liability company here:
	registered agent and/or registered office address on our records, enter the new registered office address here: Registered Agent: The standard of the limited Liability Company were filed on 4 / 7 / 2017 and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \) and assigned over \$\(\begin{align*} 4 / 7 / 2017 \\ \end{align*} \) and assigned over \$\(\
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	de:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable:	<u> </u>
(<u>Mailing address MAY BE A POST OFFICE BO</u>	<u> </u>
	RALL.
Name of New Registered Agent:	John H. Tran
New Registered Office Address:	11318 Datributen Ave. West Enter Florida street address
-	Jacksonville Florida 32256 Zip Code

New Registered Agent's Signature, if changing Registered Agent:

11

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Go Pro Marketing INC	210 S. Man St.	Add
	LINC	210 S. Man St. High Springs, FL 32643	Remove
			Change
			Remove
			☐ Change
 -			Add
			Remove
			☐ Change ☐ Add ☐ Remove
		FLORIDA	Remove
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effective date :: If the dat	if other than is listed, the date e inserted in thi ctive date on th	must be specific is block does n	c and cannot lot meet the	be prior to c applicable	date of filing	or more that filing requi	(op 1 90) days aff rements, th	tional)	suant to not be	605.020 listed a
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ated	Ate	Signature o	of a member	or authorize	ed represent	ative of a me	ember			-

Page 3 of 3

Filing Fee: \$25.00