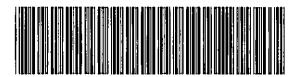
## L17000208092

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## **COVER LETTER**

Tallahassee, FL 32314

	gistration Se rision of Cor			
SUBJECT:		INSTALLERS LLC	•	, .
SUBJECT:		Name of Lim	ited Liability Company	<del></del>
The encloses	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	ı all correspo	ndence concerning this matter	to the following:	
		JEFFREY PAULINO		
			Name of Person	<del></del>
		BUCKEYE INSTALLERS	LLC	
			Firm/Company	<del>.</del>
		12117 WOOD DUCK PL		
			Address	
		TEMPLE TERRACE, FL	33617	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		JPAULINO1219@GMAIL.	COM to be used for future annual report n	otification
For further i	nformation c	oncerning this matter, please ca	·	
JEFFREY F			727 686-3232	
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed is	a check for th	ne following amount:		
<b>■</b> \$25.00		☐ \$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)
	iling Addres		Street Address:	
	gistration S vision of C	orporations	Registration S Division of C	
	D. Box 632		The Centre o	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## **BUCKEYE INSTALLERS 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 L	iability Company	were filed on $\frac{10/0}{}$	9/2017	and assigned
Florida document number L17000208092				
This amendment is submitted to amend the fol	owing:			
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>e</u> :	
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the des	ignation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if appli	12117 WOOD DI	JCK PL		
Principal office address MUST BE A STREE	TEMPLE TERRA	ACE, FL 33617		
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE  1. If amending the registered agent and/or gent and/or the new registered office addre	registered office :	12117 WOOD DI TEMPLE TERRA	ACE, FL 33617	2021 JAA TI
Name of New Registered Agent:				<del></del>
New Registered Office Address:	12117 WOOD			
-		Enter Florid	la street address	· <del></del>
	TEMPLE TER		, Florida	33617
<del></del>		City		Zip Code

eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and at the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

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>	Address	Type of Action
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			□Remove
		□Remo	□Remove
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			The
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			ZEAdd  JAIL F.
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	<del>,</del>				င့်
ite: If the date inser	er than the date of fili d, the date must be specific a ted in this block does not late on the Department of	t meet the applicabl	date of filing or more tha le statutory filing requ	(optional) n 90 days after filing. irements, this date	) Pursuant to 605.020 will not be listed as
ecord specifies a dela is filed.	ayed effective date, but n	ot an effective time	e, at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
ted		. 01			
	Alla h	/ Peula	<b>&gt;</b> -		
<del></del>	Signature of	a member or authoriz	zed representative of a ir	ember	

Filing Fee: \$25.00