LI7000252062

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COVER LETTER

TO: Registration Sec Division of Corp		• .	
SUBJECT: AME	RICA'S ROOF1	NG & FRAM	ING CONTRACTOR, LLC
	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subr	nitted for filing	
	ndence concerning this matter t	_	
	~ 1.01.		
	MAKK	WOODLOCK,	ESG
		Name of Person	
			Woodlock Construction Law Firm, P.A.
		Firm/Company	1350 Orange Avenue, Suite, 280 Winter Park, Florida 32789
		Address	
		City/State and Zip Code	
	MARKOWOOD	LOCK LAW. COM o be used for future annual rep	
			ort notification)
For further information ec	oncerning this matter, please ca	II:	
MARK WOOD	Lock, ESq.	at (407) 40	9-5305
Name of	Person	at (<u>407)</u> 40 Area Code	Daytime Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT T() ARTICLES OF ORGANIZATION **OF**

FILED

ROOFING & FRAMING CONTRACTOR

(Name of the Limited Liability Company as it now appears on our records of the Limited Liability Company)

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/66/2017 Florida document number L17000252062 This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: AMERICA'S ROOFING CONTRACTOR LLC K

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: (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 records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cav

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

AMERICA'S

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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
		y P	□Change
			□Remove
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Note:	ve date, if other than the date of filing: P
the recorecord is fi	d 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 ed.
Dated	OCTOBER 23 2020
(Signature of a member or authorized representative of a member
	BRIAN J. BLOCKER MGR Typed or printed name of signee