

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Pnone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submess Linky Harrey
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700322868857

01/03/13--01014--003 \*\*25.00

brund

JAN 1 4 2019

D CUSHING

## **COVER LETTER**

TO:

TO:	Registration Se Division of Cor			
arm III	COT:	UNITED ROOFING AND W	INDOWS LLC	
SUBJE	C1:	Name of Limi	ited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please 1	eturn all correspo	ondence concerning this matter	to the following:	
			MATT LUPTON	
		LINUTED A	Name of Person  ROOFING AND WINDOWS LLC	
		1489 W	Firm/Company PALMETTO PARK RD STE 509	
			Address	
		ВС	OCA RATON, FL 33486	ري. م
			City/State and Zip Code	<del></del>
		MATTLUPTON@TOTALI E-mail address: (	REALTYCONCEPTS.COM to be used for future annual report noti	fication)
For fur	ther information c	concerning this matter, please co	ali:	
	MATT LUPTO	אכ	954 410-2203 at ( )	
	Name o	f Person		e Telephone Number
Enclose	ed is a check for t	he following amount:		
	5.00 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)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## UNITED ROOFING AND WINDOWS LLC

ARTICLES	OF AMENDMENT		
	TO	<b>. .</b>	
ARTICLESO	F ORGANIZATIO OF	·IN	
	Or		10 The state of th
UNITED ROOFING A	ND WINDOWS LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on ited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp Florida document number L18000006250	oany were filed on0	1/08/2018	and assigned
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 design	ation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRES.	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere registered agent and/or the new registered office address  Name of New Registered Agent:		r records, <u>enter</u>	the name of the new
New Registered Office Address:	Enter Florida s	treet address	
		Florida	
	City	, Florida	Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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 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>	Type of Action
MGR	MATT LUPTON	1489 W PALMETTO PARK RD.SUITE 300-18 BOCA	Add
			= Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			☐ Change

-4-7
(optional) g or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
ive time, at $12:01$ a.m. on the earlier $\sigma$
,

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00