L1800007279

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COVER LETTER

TO: Registration Se Division of Cor						
BAY ARE. SUBJECT:	AY AREA EXTERIORS, LLC					
SUBJECT:	Name of Lim	ited Liability Compan	ý			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	RICK W. SADORF					
		Name of Perso	n			
	COOK SADORF LAW					
Firm/Compa			y			
1744 N. BELCHER ROAD, SUITE 150						
	•	Address				
	CLEARWATER, FLORIE	DA 33765				
		City/State and Zip	Code			
	RICK@COOKSADORF.C	I I				
		to be used for future a	nnuai report notific	cation)		
For further information c	oncerning this matter, please c	aii:				
RICK W. SADORF		727 at (726-1514 _)			
Name o	f Person	Area Code	e Daytime '	Telephone Number		
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Certified Co (additional copy	ру	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			REET/COURIE			
			gistration Section ision of Corporat			
		Clifton Building				
			2061 Executive Center Circle Tallahassee, FL 32301			

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

BAY AREA EXTERIORS, 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 Liability Company were filed on JANUARY 8, 2018 and assigned Florida document number _____L18000007279 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 designation "LLC" or the abbreviation "LLC." 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 , Florida New Registered Agent's Signature, if changing Registered Agent:

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 amendin or removed	g Authorized Person(s) authorized to m lfrom our records:	anage, enter the title, name, and address	of each person being added
MGR = N			
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CD HOLDINGS, LLC	1212 N. 39TH ST., SUITE 400	
		TAMPA, FL 33605	■ Remove
			Change
MGR	CD CONSTRUCTION GROUP, L.	1212 N. 39TH ST., SUITE 400	
		TAMPA. FI. 33605	☐ Remove
			□ Change
			Add
		-	□ Remove
			□ Change
			Add
			Remove
			Change
			Add
			□ Remove
			□ Change
			□ Add
			☐ Remove
			□ Change

D. If amer	nding any other info	rmation, enter change	(s) here: (Att	uch additional	sheets, if necess	cary.)	
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F Fffectio	ve date, if other than	the date of filing: JA	NUARY 8, 2011		(option	al)	_
(If an effe <u>Note:</u>	ctive date is listed, the date If the date inserted in th	e must be specific and canno is block does not meet th he Department of State's	e applicable sta		an 90 days after fil	ing.) Pursuant to 60	
	ord specifies a dela 90th day after the	ayed effective date, record is filed.	but not an e	fective time	, at 12:01 a.n	n. on the earl	ier of:
Dated _	JANUARY 17		8				
	Tal 4						
	DICK W. C. DOZ	Signature of a membe			member		
	RICK W. SADORI	F. AS AUTHORIZED R Typed	Or printed name	I			

Page 3 of 3

Filing Fee: \$2\$.00