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18 FEB 23 PM 7: 1

COVER LETTER

Division of Corporations
SUBJECT: Prestige Rooting Group, L.L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Erica Velazquez
Prestige Roofing Group, U.C.
820 Keystone Aue
Alternonte Springs, FL 32701 City/State and Zip Gode
erica V Vela 2 quez 407 @ gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Evica Vela 29 vel at (407) 549-9975 Name of Person at (407) 549-9975 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& Certificate of Status \$\Bigcup \\$ Certificate of Status \$\Bigcup \\$ (additional copy is enclosed) \$\Bigcup \\$ (additional copy is enclosed) \$\Bigcup \\$ (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

(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 0 19918 and assigned Florida document number 1800000 7533.
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 "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
, Florida
City Zip Code
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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager

AMBR = Au	thorized Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
146R	Erica Velazquez	820 Keystone Ave 12 Hamonte Sp. FL32701	Add
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an e	tive date, if other than the date of filing: (optional frective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill the fill than 100 days after fill the fill than 100 days after fill the fill than 100 days after fill tha	g.) Pursuant to 60:	5.0207
ocui	If the date inserted in this block does not meet the applicable statutory filing requirements, this date nent's effective date on the Department of State's records.	e will not be list	ted as
e re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m	. on the earli	er of
The	e 90th day after the record is filed.		
atec	Feb. 21, 2018.		
	Enca Velazque?		
	Enca Velazque? Typed of printed name of signee		

Page 3 of 3

Filing Fee: \$25.00