L18000013197

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A. RAMSEY

OCT 2 6 2022

2022 OCT 28 AM 11: 54

COVER LETTER

Division of Corp			
SUBJECT: Florid	la Superior R	oo) fing L. L. C	
	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Richard Rom	10/0 Name of Person	
	Florida S	uperious Roofing	<u> </u>
	379 Dell	Address	·····-
	Baimbridge 1	City/State and Zip Code O 1 (a) Live COM to be used for future annual report noti	
	Fichardroser	o 1 (s) live com	fication)
For further information co	oncerning this matter, please ca		
Bichard Rom	و ∕ ر	at (<u>409</u>) <u>393 -</u> Area Code Daytim	8075
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	e following amount:		
75 \$25.00 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)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 OCT 26 PM 12 11

Florida Superior Roof, (Name of the Limited Liability Compar (A Florida Limited L	y and now appears on our relability Company)	ecords.)
The Articles of Organization for this Limited Liability Company	were filed on <u>1-16-18</u>	and assigned
Florida document number <u>£ 18</u> 0000 [3]97		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	11/1	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ddress on our records, <u>c</u>	
		. Florida
	City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duti rovided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

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	Name	Address	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Renюve
			□Change
			□Remove
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			□Change

Change	EIN #	Γο	56-24870	12
				
				
	<u></u>			
			148.444	
				
				
	·····			
ective date, if other the	in the date of filing:		(0)	ptional) fter filing) Pursuant to 605.0207 (
n effective date is listed, the dote: If the date inserted in	ate must be specific and o this block does not me	annot be prior to d et the applicable	ate of filing or more than 90 days a e statutory filing requirements,	fter filing) Pursuant to 605,0207 (, this date will not be listed as the
cument's effective date on	the Department of Sta	te's records.	, - ,	
ecord specifies a delayed e s filed.	ffective date, but not a	n effective time.	at 12:01 a.m. on the earlier of	(b) The 90th day after the
s meg.				
and 10 · 26 -	2027			
// /	10		ed representative of a member	
Licht	Konw-			
	Signature of a me	ember or authorize	ed representative of a member	
$\mathcal{P}^{*}I$	al Ram	200	ame of signee	
111646	CACK DOPPE	Series or printed a	and of signer	

Filing Fee: \$25.00