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2018 MAR 30 PM 12: 29

FILED

S. WARREN MAR 3 0 2018

COVER LETTER

	gistration Sec ision of Corp			
CHD IECT.	Strata Roofi	ng, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	I Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Tracy A. Feamster		
			Name of Person	
		Strata Builders, LLC		
			Firm/Company	
		2801 S. Bay Street		
			Address	
		Eustis, FL 32726		
			City/State and Zip Code	
		accounting@stratafl.com	. Les Control and a second	E agricus
For further is	aformation co	ncerning this matter, please ca	Name of Person Firm/Company Address City/State and Zip Code om ress: (to be used for future annual report notification) case call: at (
Tracy A. Fer	umster			
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25,00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

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

Strata Roofing, 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 $\frac{1/23/2018}{1}$ and assigned Florida document number <u>L18000</u>020734 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Haven Rooting, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2801 S. Bay Street Enter new principal offices address, if applicable: Eustis, FL 32726 (Principal office address MUST BE A STREET ADDRESS) 2801 S. Bay Street Enter new mailing address, if applicable: Eustis, FL 32726 (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

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 miled billity company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Seent

__. Florida _

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard B. Ryals	2801 S. Bay Street	Add
		Eustis, FL 32726	□ Remove
			☐ Change
			Add
			□ Remove
			□ Change
			□ Remove
			☐ Change
			Add
			Remove
			□ Change
			☐ Remove
			Change SEGRETARY Remove
			AHASSSE Dr. FLORID
			Sign Change

. If am	ending any other information, en	ter change(s) here: (A	ttach additional sheets, if	necessary.)	
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(If an el <u>Note:</u>	tive date, if other than the date of fective date is listed, the date must be speci. If the date inserted in this block does nent's effective date on the Department.	fic and cannot be prior to date not meet the applicable s	of filing or more than 90 days.		
	cord specifies a delayed effect 90th day after the record is f		effective time, at 12:0)1 a.m. on the earli	er of:
Datec	March 29 Signature	2018 Lecensities of a member or authorized	representative of a member	2018 MAR 30 SEURE TAN L TALLIAHASSE	T 1
	Tracy A. Feamster			MAR 30 KETAN I AHASSI	LED
		Typed or printed nan	ne of signee	PM PM	
		Page 3 of	3	PM 12: 29 or 51&15 E. FLORIDA	

Filing Fee: \$25.00