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COVER LETTER

Divi	sion of Corp	orations			
SUBJECT:	Haven Roofi	ng LLC			
Nubat.et:		Name of Limi	ited Liability Company		
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		Richard B. Ryals			
	Name of Person				
		Haven Rooting LLC			
	Firm Company 2801 S. Bay Street				
			Address		
		Eustis, FL 32726			
		brock@stratafl.com	City/State and Zip Code		
		E-mail address: ()	o be used for future annual report nouf	ication)	
For further in	formation co	ncerning this matter, please ca	dl:		
Richard B. R	yals		352 720-0925		
Name of Person			at () Area Code Daytime	Telephone Number	
Enclosed is a	check for the	following amount:			
■ \$25,00 Fi	ling 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:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahussee, 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**

Haven 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 1/23/18 and assigned Florida document number L18000020734 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 "LLU" 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: Richard B. Ryals Name of New Registered Agent: 2801 S. Bay Street New Registered Office Address: Enter Florida street address _, Florida 32726 Zip Code Eustis

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.

Cin

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Kenneth R. Hutchinson	2801 S. Bay Street Eustis, FL 32726	
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory filling of the date inserted in the Department of State's records.	r more than 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not an effective he 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier o
ed 11/27/18	
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee