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(Req	uestor's Name)	
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SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: The	Matal Roof . T. le E Name of Lin	Aports, LLC nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Debbie Bruc	£	-
	. The Metal of an	Name of Person Tile Roof Experts, LL	C.
		Firm/Company	<u> </u>
	327 55th flo		
		Address	
	34 Pete Boac	th, FL 33706	
		City/State and Zip Code	
	1050 @ them	to be used for future annual report notifi	C
For further information c	concerning this matter, please co	•	acation)
Name of Person		at (೪७૩)	A3
		Area Code Daytime Telephone Number	
Enclosed is a check for the	he following amount:		
\$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)

ŤO:

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

The Matal Koof & Tile Exper		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on o2 o1 2018	and assigned
Florida document number _ \(\lambda \) \(\		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab		
The Metal a Tile Roof Experts L. The new name must be distinguishable and contain the words "Limited Liabil		abbraviation "I I C"
The new name must be distinguishable and contain the words. Limited Liabil	nty Company, the designation LLC of the	addieviation L.L.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		,
Enter new mailing address, if applicable:	/	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of		er the name of the new
registered agent and/or the new registered office address her	<u>e</u> :	ZOIN SEC
Name of New Registered Agent:		T F AND
New Registered Office Address:	<u> </u>	SEE
	Enter Florida street address	FIGURE OF SERVICE OF S
	City , Florida	Srr 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, 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>	Address	Type of Action
AMBR	Debbu Bruce	6180 San Blvd # 401	Add
		CAIBO SON Blvd # 401 St Petersburg, Fr 33715	□ Remove
			☐ Change
			🗆 Add
			☐ Remove
			☐ Change
			□ Remove
			Change
<u>.</u>			
			Remove
			Change
	-		🗅 Add
			Remove
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(If an effectiv <u>Note:</u> If the	date, if other that we date is listed, the da he date inserted in t is effective date on	ite must be specific his block does no	and cannot be p ot meet the app	rior to date of fil olicable statuto	ing or more than	(options 90 days after fili rements, this da	ng.) Pursuant to	605.0207 listed as
		layed effective record is file		not an effe	ctive time, a	at 12:01 a.n	n. on the ea	arlier of
	th day after the							
	th day after the	Mon	, 2018	tha				

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Filing Fee: \$25.00