L1800032645

Office Use Only



600308931396

02/12/18--01010--030 **25.00

18 FEB 12 PM 5: 12

B FIGUEROA FEB 1 4 2018

COVER LETTER

	Registration Sec Division of Corp					
SUBJEC		TREJO RESENDIZ ROOFING LLC				
SUBJEC	.1.	Name of Limi	ted Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please re	turn all correspon	ndence concerning this matter	to the following:			
		Jose Trejo Resendiz				
			Name of Person			
TREJO RESENDIZ ROOFING LLC						
Firm/Company						
4080 16th PL SW Unit 1						
			Address	····		
	Naples FL 34116					
	City/State and Zip Code					
	E-mail address: (to be used for future annual report notification)					
For furth	er information co	oncerning this matter, please ca	all:			
Jose Trejo Resendiz			239 404-4684 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	d is a check for th	ne 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)		

ŤΟ:

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

TREJO RESENDIZ ROOFING L	LC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I	Liability Company were filed on	02/05/2018	and assigned
lorida document numberL18000032645	·		
his amendment is submitted to amend the fol	lowing:		
a. If amending name, enter the new name	of the limited liability company h	<u>ere</u> :	
TREJO RESENDIZ SERVICE LLC			
he 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 appli	icable: N/A		
Principal office address MUST BE A STRE	ET ADDRESS)		
	 		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	F ROY)		
numing dudress mai be at our office			
3. If amending the registered agent an	l/au mariatawad affica adduses o	m our rooseds onto	w the name of the
s. If amending the registered agent and egistered agent and/or the new registered		n our records, <u>ente</u>	the name of the
	-		6 X
	N/A		EB SEC
Name of New Registered Agent:	1011		2 07 F
New Registered Office Address:			TO THE
	Enter Flo	orida street address	3 0 5
		. Florida	5. AZ
	City	, rioriua _	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
			□ Add
			□ Remove
			□ Change
			□ Add
		profession and the second of t	□ Remove
			☐ Change
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	□ Add
			☐ Remove
			Change
		The second of th	□ Add
		**************************************	☐ Remove
			☐ Change
-			Add
			B Remise
			FEB Chaire
			Remove
			☐ Change

	·					. <u>.</u>	
•	*						
					 .		_
							_
		<u></u>					
		-					
	· · · · · · · · · · · · · · · · · · ·			···			
							
	,						
							
						•	_
							
							_
				<u> </u>			-
		<u> </u>					
ffective da	ate, if other than the date	of filing:	Jan 4	(op	tional)	ant 4 - 1	(ne na
an effective	date is listed, the date must be sp date inserted in this block do effective date on the Departn	oes not meet the app	licable statutory fili	ng requirements, t	his date will no	ot be l	isted a
ote: If the							-1! ·
ote: If the ocument's e	specifies a delayed effe n day after the record is		not an effective	time, at 12:01	. a.m. on th	ie eai	riier
ote: If the ocument's a record:	n day after the record is			time, at 12:01		••	riier (
ote: If the ocument's occument's occument, occument occument, occumen	n day after the record is	s filed.		time, at 12:01		e ea	riier (
ote: If the ocument's a record:	n day after the record is	s filed.		time, at 12:01	;	••	DEVISION O
ote: If the ocument's a record:	February 08	s filed.	· · · · · · · · · · · · · · · · · · ·		;	18 F	SECRETARY
ote: If the ocument's a record:	February 08	s filed. 2018 ature of a member or au	· · · · · · · · · · · · · · · · · · ·		;	18 FEB	SECRETARY OF CORPS

Page 3 of 3

Filing Fee: \$25.00