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TALLAHASSEE, FLORIDA  
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N COOPER

APR 09 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Gale Force Roofing and Restoration, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alex Dewey

\_\_\_\_\_  
Name of Person

Gale Force Roofing and Restoration, LLC

\_\_\_\_\_  
Firm/Company

3902 Henderson Blvd., Suite 208 #337

\_\_\_\_\_  
Address

Tampa, FL 33629

\_\_\_\_\_  
City/State and Zip Code

alex.dewey@galeforceroofing.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alex Dewey

813 455-1221  
at ( )  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**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



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>	<u>Type of Action</u>
AMBR	Alex Dewey	4018 W. Knights Avenue	<input type="checkbox"/> Add
		Tampa, FL 33611	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alexander M. Dewey	4018 W. Knights Avenue	<input checked="" type="checkbox"/> Add
		Tampa, FL 33611	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lifetime Quality Roofing and Storm	100 East Campus View Blvd.	<input checked="" type="checkbox"/> Add
		Suite 250	<input type="checkbox"/> Remove
		Columbus, OH 43235	<input type="checkbox"/> Change
MGR	Scott D. Hoff	7708 Hominy Hill Court	<input checked="" type="checkbox"/> Add
		Pickerington, OH 43147	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D: If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated April 3, 2018

Alexander M Dewey

Signature of a member or authorized representative of a member

Alexander M Dewey

Typed or printed name of signee