L1800005803Z

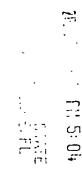
(Requestor's Name)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Busiless Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special instructions to Filing Officer:					

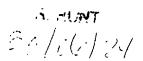
Office Use Only



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COVER LETTER

TO:

TO: Registration So Division of Cor					
Gale Force	Gale Force Roofing and Restoration, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jeremy Bailie				
Name of Person					
	Weber, Crabb & Wein, P.A	۸.			
Firm/Company					
5453 Central Avenue					
		Address			
	St. Petersburg, Florida 337	710	<u></u>		
		City/State and Zip Code			
	jeremy.bailie@webererabb.		on) 77 57 57 57 50 64 57 57 57 57 57 57 57 57 57 57 57 57 57		
For further information e	encerning this matter, please c	to be used for future annual report notificationall:	on) 7 0 0		
Jeremy D. Bailie		727 828-9919			
Name o	f Person	Area Code Daytime Tele	ephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		Street Address: Registration Section	1		
Division of Corporations		Division of Corpora	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gale Force Roofing and Restoration, LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on March 5, 2018	_ and assigned
lorida document number L18000058032		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
lifetime Quality Roofing - Tampa LLC		
he new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbre	eviation "L.L.C."
inter new principal offices address, if applicable:		·
Principal office address MUST BE A STREET ADDRESS)		• •
	.,,_	
Inter new mailing address, if applicable:	. 36.	<u>=</u>
Mailing address MAY BE A POST OFFICE BOX)		-::
runing unitess MAT BE AT OST OTTICE BOX	(1)	
3. If amending the registered agent and/or registered office a	ddress on our records, enter the name (of the new regi
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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
			□Remove
			<u>·:</u> □Change
			 □Add
			□Remove
			. Sc. Un En Change
		·	□Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
.			
			□Remove
			□C'hanga

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 ___ 2024 Jeremy D. Bailie Signature of a member or authorized representative of a member

Typed or printed name of signee

Jeremy D. Bailie