L18000078111

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SECRETARY OF STATE

3/4/21

COVER LETTER

TO:

Registration Section

Division of Cor	rporations		•			
4 ANGELS	S CONSTRUCTION & ROOFI	NG, LLC				
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:				
	DIANA DAVIS BASTA,	ESQ.				
		Name of Person				
	DAVIS BASTA LAW FIR	RM, P.A.				
		Firm/Company				
	31115 U.S. HIGHWAY 15) N				
		Address				
	PALM HARBOR, FL 346	84				
		City/State and Zip Code				
	beskaly@yahoo.com					
	E-mail address: (to be used for future annual report no	ntification)			
For further information of	concerning this matter, please c	all:				
DIANA DAVIS BASTA	A	727 938-2255				
Name o	of Person	at () Area Code Dayti	me Telephone Number			
Enclosed is a check for t	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 Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee roe Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

4 ANGELS CONSTRUCTION & ROOFING, LLC

2021 JAN 21 PM 6: 17

(Name of the Limited Liability Company as it now appears on our records RETARY OF STATE (A Florida Limited Liability Company) TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on 3/27/18 ____ and assigned Florida document number L18000078111 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 "LLC" 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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
P	ENGY BESKALY	3531 FORAY LANE	□Add
		NEW PORT RICHEY, FL 34655	≅Remove
P ELIA BESKALY	3531 FORAY LANE	□ Add	
	NEW PORT RICHEY, FL 34655	□Remove	
			■Change
			□ Add
		 	□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			Remove
			□Change

	
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	<u> </u>
Effective date, if other than the date of filing:	suant to 605.0207 not be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 d is filed.	th day after the
Dated 2021	
Signature of a member or authorized representative of a member	
DIANA DAVIS BASTA	<u></u>

Filing Fee: \$25.00