Division of Corporations

L18000166691

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617 6383

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Account Name : SERVICIOS COMUNITARIOS LATINOS INC
Account Number : [illegible]
Phone : (305)642-1690
Fax Number : (305)642-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*
Email Address: Nixonremodeling@live.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GULFESTREAM GENERAL ROOFING LLC

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7/19/18 DS

July 18, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GULFSTREAM GENERAL ROOFING LLC
1353 NW 5TH ST
1
MIAMI, FL 33125US

SUBJECT: GULFSTREAM GENERAL ROOFING LLC
REF: L18000116091

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Vertical line going through application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

FAX Aud. #: H18000206665
Letter Number: 018A00014718

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GULFSTREAM GENERAL ROOFING 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:

NIXON H ELVIR CANTARERO
Name of Person

Firm/Company

1353 NW 5TH ST APT 1
Address

MIAMI, FL. 33125
City/State and Zip Code

NIXONREMODELING@LIVE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NIXON H ELVIR CANTARERO at (754) 465-1648
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GULFSTREAM GENERAL ROOFING LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/08/2018 and assigned Florida document number L18000116091.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A
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: NIXON H. ELVIR CANTARERO

New Registered Office Address: 1353 NW 5TH ST #1
Enter Florida street address

MIAMI, Florida 33125
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

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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

Title	Name	Address	Type of Action
MGR	ELVIR CANTARERO, NIXON H.	1353 NW 5TH ST #1 MIAMI, FL. 33125	■ Add ☐ Remove ☐ Change
MGR	ELVIR SANTARERO, NIXON H.	1353 NW 5TH ST #1 MIAMI, FL. 33125	☐ Add ■ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

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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 July 18, 2018.

Signature of a member or authorized representative of a member

NIXON H. ELVIR CANTARERO

Typed or printed name of signee

Filing Fee: $25.00

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