

L18000203801

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

A. Bartlett Roofing & Construction

Services LLC

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
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☒ Art. of Amend. File _____
____ RA Resignation _____
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____ Certificate of Status _____
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____ Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A. BARTLETT ROOFING & CONSTRUCTION SERVICES, 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:

DEREK LARSEN-CHANLEY
Name of Person

PHILIPS DUNBAR LLP
Firm/Company

100 S. ASHLEY DR., SUITE 2000
Address

TAMPA, FL 33602
City/State and Zip Code

CHANLEYD@PHILIPS.COM
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

DEREK LARSEN-CHANLEY at (813) 222 7677
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

A. BARTLETT ROOFING & CONSTRUCTION SERVICES, 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 8/24/18 and assigned
Florida document number L18000203801

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

City, Florida 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>	<u>Address</u>	<u>Type of Action</u>
<u>CEO</u>	<u>DANIEL MCKERRAN</u>	<u>5333 RIVER ROAD</u>	<input checked="" type="checkbox"/> Add
		<u>HARAHAN, LA 70123</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>CFO</u>	<u>DAVID COHN</u>	<u>5333 RIVER ROAD</u>	<input checked="" type="checkbox"/> Add
		<u>HARAHAN, LA 70123</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>S</u>	<u>CHARLES JOHNSON</u>	<u>5333 RIVER ROAD</u>	<input checked="" type="checkbox"/> Add
		<u>HARAHAN, LA 70123</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated 10/8/18

Signature of a member or authorized representative of a member

David Gohn
Typed or printed name of signee