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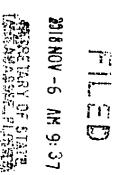
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## **COVER LETTER**

SUBJECT:	Name of Lim	ited Liability Company	
-			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MERCEDES DELEON		
		Name of Person	<del></del>
	RAPID RESPONSE STOR	RM GROUP, LLC	
		Firm/Company	· <del>-</del>
	1155 S POWER RD #114-	96	
•		Address	
	MESA, AZ 85209		
	INFO@RAPIDRESPONSE	City/State and Zip Code SERVICES.CO	···
	E-mail address: (	to be used for future annual report	notification)
For further information	concerning this matter, please ca	a11:	
		at () Area Code Da	
Name	of Person	Area Code Da	ytime Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 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

TO:

Registration Section
Division of Corporations

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

LANSTAR ROOFING, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000220829	were filed on SEPT. 12, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
RAPID RESPONSE STROM GROUP, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1155 S POWER RD #114-96	
(Principal office address MUST BE A STREET ADDRESS)	MESA, AZ 85206	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
Studing undress MAT BE AT OST OFFICE DOX		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		-6 -6
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	9: 37
	, Florida	
	City	Zin 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 = M $AMBR = A$	Ianager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
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Effective date, if other than the date of filing:  (lf 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.) Pursual  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ni (6605.020 i be listed a:	7+3)(b)	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the o). The 90th day after the record is filed.	earlier o	if:	
Dated OCTOBER 26 2018  Signature of a member or authorized representative of a member			
MERCEDES DELEON			
Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00