L18000243796

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AUG 0 9 2019 S. YOUNG

COVER LETTER ·

Division of Cor			• .
Breakaway	Construction LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Trenika Miles		
		Name of Pérson	
	UnderTRoofLLC		
		Firm/Company	
	2122 Orange Tree Dr		
		Address	
	Edgewater, FL 32141		
	under froof, llc 1@gmail.com		
		to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please c	all:	
Trenika Miles		386 690-1293	
Name o	of Person	at () Area Code Daytime	Telephone 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)	☐ \$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

Breakaway Construction LLC			台馬丁
(Name of the Limited Liability Compar (A Florida Limited L	w as it now appearability Company)	ars on our records.)	LED LED
The Articles of Organization for this Limited Liability Company	were filed on _	10/16/2018	and assigned
Florida document number 1.18000243796			and assigned
This amendment is submitted to amend the following:	•		
A. If amending name, enter the new name of the limited liabi	lity company h	<u>iere</u> :	
Under1Roof LLC			<u></u>
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the	designation "LLC" or the abb	previation "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 here		on our records, <u>enter</u> (the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address: Enter Florida street address			
	Florida		
	Cîty		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of	performance o provided for in	f my duties, and I am fo Chapter 605, F.S. Or, (miliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
		<u> </u>	_ □ Add
			Remove
			Change
			Remove
			Change
			□ Remove
			□ Change
			Remove
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			Change
			
			Remove
			☐ Change

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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The poth day after the record is filed. Dated July 24 2019 Signature of a member of a member of a member representative of a member.			_	<u>-</u>		.	
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Musika Wink	July 24		2019				
Signature of a member or authorized representative of a member	- Jua	illa	Minh	_·	, ,- ,-		
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Filing Fee: \$25.00