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| (Requestor's Name)                      |      |
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| Certified Copies Certificates of Statu  | s    |
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| Special Instructions to Filing Officer: |      |
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JAN 0 2 2020 S. YOUNG



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2019

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IDALMI SANCHEZ TWO BROTHERS ROOFING LLC 2096 SW 156TH AVENUE MIAMI, FL 33185

SUBJECT: TWO BROTHERS ROOFING, LLC Ref. Number: L19000075729

We have received your document for TWO BROTHERS ROOFING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 219A00025305

PN 1:58 2019 DEL 20 .

## **COVER LETTER**

Registration Section Division of Corporations

· ,

BJECT: TWO BROTHERS ROOFING LLC Name of Limited Liability Company

e enclosed Articles of Amendment and fee(s) are submitted for filing.

:ase return all correspondence concerning this matter to the following:

IDALMI SANCHEZ Name of Person TWO BROTHERS ROOFING, LLC Firm Company 2096 SW 156TH AVENUE Address MiANI FL 33185 City/State and Zin Code IDALMIS 1826 @ JAHOO. COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IDALMISANCHEZat (786)299.1823Name of PersonArea CodeDavime Telephone Number

Enclosed is a check for the following amount:

C \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) 1 \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

| ARTICI:ES OF                                                                                                             | AMENDMENT<br>O                                |                                        |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------|
|                                                                                                                          | O<br>DRGANIZATION                             | 5. a 15                                |
|                                                                                                                          | )F                                            |                                        |
| 0                                                                                                                        |                                               |                                        |
| Two BROTHERS ROOFING<br>(Name of the Limited Liability Compa<br>(A Florida Limited                                       | LLC<br>iny as it now appears on our records.) | FILES AR 9 23 gned                     |
| (A Pionda Limited                                                                                                        | Laonny Company)                               | <u>6</u>                               |
| e Articles of Organization for this Limited Liability Company                                                            | were filed on                                 | Sand a Signed                          |
| orida document number <u>19000075729</u> .                                                                               |                                               |                                        |
| is amendment is submitted to amend the following:                                                                        |                                               |                                        |
| . If amending name, <u>enter the new name of the limited liab</u>                                                        | ility company here:                           |                                        |
| Two BROTHERS TRUCKING L<br>ne new name must be distinguishable and contain the words "Limited Liabi                      | Hty Company," the designation "LLC" or i      | he abbreviation "L.L.C."               |
| nter 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>B.</b> If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>enter the</u>      | name of the new registered             |
| agent analysis the new registered office address nere.                                                                   |                                               |                                        |
| Name of New Registered Agent:                                                                                            |                                               |                                        |
| Name of New Registered Agent.                                                                                            |                                               |                                        |
| New Registered Office Address:                                                                                           |                                               |                                        |
|                                                                                                                          | Enter Florida street address                  |                                        |
|                                                                                                                          | , Florid                                      | aZip Code                              |
|                                                                                                                          | Cinv                                          | 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 dutics, 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

mending Authorized Person(s) authorized to manage <u>enter the title, name, and address of each person</u> being added <u>emoved from our records</u>:

## GR = Manager (BR = Authorized Member)

| <u>le</u> | <u>Name</u> | Address   | <b>Type of Action</b> |
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 | DECEMBER 23 | 2019                                                   |
|-------|-------------|--------------------------------------------------------|
|       | -           | Hunto                                                  |
|       | Signatu     | re of a member or authorized epresentative of a member |
|       | IDALMI      | SANCHEZ                                                |
|       |             | Typed or printed name of signee                        |

Filing Foot \$25.00