K19000106829

(Requestor's Name) (Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Spoke to Calvin Gray authorized to make
Changes, sent correct
rame by composition

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COVER LETTER

	Registration S Division of Co							
elin ir e		RE OUTDOOR FLORIDA. LL	С					
SUBJEC	1;	Name of Lim	ited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please ret	urn all corresp	ondence concerning this matter	to the following:					
		CALVIN GRAY						
			Name of Person	 -				
		STRUXURE OUTDOOR	FLORIDA					
			Firm/Company					
		10428 West SR 84, Unit 6						
			Address	 -				
		Davie, Fl. 33324						
		City/State and Zip Code						
		calvin.gray@struxure.com						
		E-mail address: (to be used for future annual report	notification)				
For furthe	er information of	concerning this matter, please ca	all:					
Calvin G	тау		941 321-970 at ()					
	Name (of Person	Area Code Da	rytime Telephone Number				
Enclosed	is a check for t	he following amount:						
□ \$25.0	0 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 radditional copy is enclosed)				

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 OCT 21 AM 9: 19

STRUXURE OUTDOOR FLORIDA, LLC

(Name of the Limited Liability Company as it now appears on our records.) TALLARY SETATE (A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	ability Company	were filed on 04/18/201	and assigned
Torida document number 119000106829	····································		
his amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
Automated Pergolas, LLC			
he new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	10428 West SR 84, Un	it 6
Principal office address MUST BE A STREET		Davie, FL 33324	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE E	<u>80X)</u>	Same as above	
3. If amending the registered agent and/or regent and/or the new registered office address		address on our records	, enter the name of the new register
Name of New Registered Agent:	Calvin Gray		
New Registered Office Address:	10828 NW 83r	d Court	
		Enter Florida stree	a address
	Parkland		Florida ³³⁰⁷⁶
	•	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.

f 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:

AMBR = Authorized Member	
<u>Title</u> <u>Name</u> <u>Address</u>	Type of Action
	□Add
	□Remove
	□Change
	□Add
	□Remove
	□Add
	□Remove
	□Change
	□Add
	□Remove
	□Change
	□Add
	□Remove
	□Add

Fifective date, if other than the date of filing: (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.) Parsuant to 605,0207 (3 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. 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 cord is filed. Dated September 29 2021 Signature of a member or substruct depresentative of a member). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Curvin Chay		Signature of a member or authorized representative of a member Calvin Gray