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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
SUBJECT:	E Roofing ond Name of Li	Constructing mited Liability Company	146
The enclosed Articles of	Amendment and fee(s) are su	abmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
	Monica N	7. Free land Name of Person	
		Firm/Company	
	3446 A	Address	
		7L 3233 City/State and Zip Code Q Jaw F A	Conn
For further information co	oncerning this matter, please c		report interesting
Mon: (c Fr	Person	at ()	251 1087 Daytime Telephone Number
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee		S55.00 Filing Fee & Certified Copy tadditional copy is enck	Certificate of Status
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Division The Cent 2415 N.	dress: tion Section of Corporations tre of Tallahassee Monroe Street, Suite 810 see, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabilli (A Florida	nd Constructi	ur records.)
(Name of the Limited Liability CA Florida The Articles of Organization for this Limited Liability C Florida document number 2000014052 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited to a second sec	Company were filed on/_/	21/2020 antifassigned 7
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designat	ton "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	PESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stred	et address
		, Florida
	City	Zıp 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>	Name	Address	Type of Action
MGR	Monica M. Freeland	2618 Centennial Place	🗆 Add
		TallaLusser, 72 32308	X Remove
			_
MGR	Johnny P. Evans,	Monticello, 72 32344	<u>⊁</u> X Add
		Monticello, 72 32344	□Remove
			□Change
			□Add
			□Remove
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	if other than the date of file is listed, the date must be specific a e inserted in this block does no ctive date on the Department of		date of filing or more than 90 e statutory filing requirer	(optional) days after filing.) Pursuant to nents, this date will not be	605 0207 (listed as t
e record specifi rd is filed.	s a delayed effective date, but n	not an effective time	at 12:01 a.m. on the ear	lier of: (b) The 90th day a	ıfter the
Dated		_·			
		nula	ed representative of a memb		
	Signature of	a member of authorize	d temesentative of a memb	or	

Filing Fee: \$25.00