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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: ARK ECO CONSTRUCTION & ROOFING LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ZACHARY ENGLAND

Name of Person

ARK ECO CONSTRUCTION & ROOFING

Firm/Company

24301 WALDEN CENTER DR, #300

Address

BONITA SPRINGS, FL 34134

City/State and Zip Code

ARK ECOLLC @ GMAIL. COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZACHARY ENGLAND	at (954)	865-3629	
Name of Person	Area Code	Daytime Telephone Number	, ;

Enclosed is a check for the 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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## ARK ECO CONSTRUCTION & RODFING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab Florida document number		03/30/2020	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of t	he limited liability company h	<u>ere</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the o	designation "LI.C" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or reg agent and/or the new registered office address		records, enter the name	of the new registered
Name of New Registered Agent:	ZACHARY	ENGLAND	()
New Registered Office Address:	24301 WALDEN	CENTER DR.,	STE 300 :
	BONITA SPRING		•
New Registered Agent's Signature, if changing Reg	gistered Agent:		±,3 ∧x
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the region company has been notified in writing of this change in the change in t	and complete performance of ered agent as provided for in G gistered office address, I here nange.	f my duties, and I am fai Chapter 605, F.S. Or, if	miliar with and  this document is ted liability

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>	<u>Name</u>	Address	Type of Action
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ctive date, if other than effective date is listed, the date	the date of filing: _		(	optional)
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Filing Fee: \$25.00