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COVER LETTER

TO:

Registration Section

Division of Co	rporations				
2115 ID 070	Four Po	aks Roofing, LLC			
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		James A Chouinard, CPA			
	Name of Person				
James A. Chouinard, CPA, LLC					
		Firm/Company			
12611 New Brittany Blvd					
		Address			
		Fort Myers, FL 33907			
City/State and Zip Code					
		chouinard@ftmyersepa.com			
	E-mail address: (to be used for future annual report not	ification)		
For further information of	oncerning this matter, please c	all:			
Michael Sozio		602 505-0776			
Name o	t Person		ne 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		<u>Street Address:</u> Registration Se	etion		
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		The Centre of 1 2415 N. Monro	Fallahassee c Street, Suite 810		
rununussee, r.b. 125 tr		Tallahassee, F1			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

띯

Four Peaks	Rooting, LLC	
(Name of the Limited	Liability Company as it now appears on our records,) Florida Limited Liability Company)	F 50 - 5
(1)	Florida Cimited Ciability Company)	
The Articles of Organization for this Limited Liab	ility Company were filed on May 5, 2020	in in it is a signed in it is
Florida document number L20000122077		PA F: 19
		70%
This amendment is submitted to amend the follow	ing:	233 :
		4
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" of	the abbreviation "L.L.C."
	,,,,,,,, .	
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)V)	
(Statung dauress STAT BE A PUST OF PICE BU	<u> </u>	
		
B. If amending the registered agent and/or regi		e name of the new registered
agent and/or the new registered office address l	<u>iere</u> :	
Name of New Registered Agent:		
Name of New Registered Agent.		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Florio	
	Ciţ	Zip Code
81 13 1 . 14 .3 CT . 16 1 1 H		

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Scott Sozio	4331 SW 28th Place	■Add
		Cape Coral, FL 33914	□Remove
		<u>-</u>	□Change
			🗀 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		 	□Remove
		 -	□Change
			□Add
			□Remove
			□ Change

D. If amending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: If the date inserted in this	the date of filing:	05.0207 (3)(b isted as the
If the record specifies a delayed efferecord is filed.	ctive date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 90th day af	fter the
Dated	. 2020	
mod fas		
	Signature of a member or authorized representative of a member	
	Michael Sozio	
	Typed or printed name of signee	

Filing Fee: \$25.00

Four Peaks Roofing, L.L.C._Articles of Amendement - Add Scott Sozio

Final Audit Report

2020-07-28

Created:

2020-07-28

Ву:

James Chouinard (jchouinard@ftmyerscpa.com)

Status:

Signed

Transaction ID:

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"Four Peaks Roofing, L.L.C._Articles of Amendement - Add Scot t Sozio" History

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