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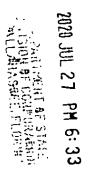
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SEP 1 7 2020

S. YOUNG



COVER LETTER

Division of Cor	porations				
Kens prime	Siding LLC	•			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Vernon Martin				
		Name of Person			
		Firm/Company			
	8140 Eight Mile Creek Ro	ad .			
	· · · · · · · · · · · · · · · · · · ·	Address	-		
	Pensacola Florida 32526				
	vernonmartins@juno.com	City/State and Zip Code	•		٠
	E-mail address: (to be used for future annual report not	ification)		
For further information of	concerning this matter, please c	all:			
Vernon Martin		850 380-5554 at ()	[.: ·
Name o	of Person	Area Code Daytin	ne Telephone Number		
-			May Same	4 700 225 10	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection		

Registration Section Division of Corporations P.O. Box 6327

Registration Section

TO:

Tallahassee, FL 32314

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

Kens Prime Siding LLC		
(Name of the Limited Liabi	lity Company as it now appears on our records da Limited Liability Company)	
The Articles of Organization for this Limited Liability		and assigned
Florida document number	 :	是了
This amendment is submitted to amend the following:		6: 32 6: 32
A. If amending name, enter the new name of the lin	nited liability company here:	.,
The new name must be distinguishable and contain the words "Lit		
		
<u>(Principal office address MUST BE A STREET ADD</u>	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Fla	rida
	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.

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
MGR	Kevin Nork	5529 Empire Drive, Lot D	
		Pensacola FL 32505	= Remove
MGR	Matthew Powell	3318 West Lee Street	□ Add
		Pensacola FL 32505	■ Remove
			Change
			
			□ Remove
			□Change
	 		□Add
		□Change	
			
			Remove
			Change
			□Add
			□ Remove
			□Change

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 d is filed. Dated 7/24/2020 Signature of a member or authorized representative of a member		
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