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COVER LETTER

	Registration Se Division of Cor					
SUBJEC		OOFS DEPOT LLC				
SUBJEC	. ;	Name of Lim	ited Liability Company			
The enclo	osed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Please re	turn all correspo	indence concerning this matter	to the following:			
		Michelle Cangialosi				
			Name of Person			
		METAL ROOFS DEPOT	LLC			
			Firm/Company			
		14260 W Newberry Road #368				
		Address				
		Newberry, FL 32669				
		City/State and Zip Code				
		office@happyhome-constru				
			to be used for future annual report noti	neation)		
For furth	er information c	oncerning this matter, please c	all:			
Michelle	Cangialosi		954 422-3328 at ()			
	Name o	f Person	Area Code Daytim	ne Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25.0	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 Addres Registration S		<u>Street Address:</u> Registration Se	ction		
	Division of C		Division of Cor			

Registration Section Division of Corporations P.O. Box 6327

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

METAL ROOFS DEPOTILEC

company has been notified in writing of this change.

(Name of the Lim	ited Liability Compai (A Florida Limited L	ny as it now appears on ou liability Company)	ar records.)	
<u>-</u>		were filed on <u>07/07/20</u>	20 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liabi	lity company here:		
The new name must be distinguishable and contain the	words "Limited Liabili	ity Company," the designat	ion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	·	. <u>.</u> .	
(Principal office address MUST BE A STRE	ET ADDRESS)			
••				
Mailing address MAY BE A POST OFFICE	<u>: BOX)</u>			
The Articles of Organization for this Limited Liability Company were filed on 07/07/2020 and assigned Florida document number. L20000192706 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address MUST BE A STREET ADDRESS) Enter new mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 14260 W Newberry Road #368 Enter Florida street address Newberry Florida 2260 Zap 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 603, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability				
	14260 W Newbo	erry Road #368		
New Registered Office Address.			vet address	
	Newberry		, Florida 32669	
		Cay	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:			
provisions of all statutes relative to the projection as reg	per and complete printer is the complete printered agent as printered agent	performance of my di rovided for in Chapto	tties, and I am familiar with and er 605, F.S. Or, if this document is	

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
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

Iffective date, if other than the date of filing: (optional)	_	
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.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to ocument's effective date on the Department of State's records. The 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 distributed is filed. Signature of a member or authorized representative of a member		
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Filing Fee: \$25.00