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(Re	equestor's Name)	
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2020 AUG 10 PH 1: 14 SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Zieglowsky 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:
Larry Zieglowsky
Zieglowsky Rooting LLC Firm/Company
4586 13th PL Address
Vero Beach FL 32966 City/State and Zip Code Zieglows ky Roofing a gmail = com Brazil address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Larry Zieglowsky at 772 643 6945 Name of Person Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$25,00 Filing Fee \$\Bigsquare \$30.00 Filing Fee & \Bigsquare \$55.00 Filing Fee & \Bigsquare \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certificate 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

FILED

Zieglowsky Root;	12 LLC 2020 AUG 10 PH 1: 14
(<u>Name of the Limited Liability Compar</u> (A Florida Limited I.	2020 AUG 10 PH 1: 14 IV As H how appears on our records. SECRETARY OF STATE TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company	were filed on $7-20-20$ and assigned
Florida document number <u>L20002107</u> 18	
This amendment is submitted to amend the following:	
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	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as public filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
Dwner	Larry Zieglowsky	4586 13th PL	A dd
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	an the date of filing:	
	7	(optional) filing or more than 90 days after filing.) Pursuant to 605.0
If the date inserted in	this block does not meet the applicable statut	tory filing requirements, this date will not be listed
ment's effective date o	n the Department of State's records.	
ord specifies a delayed filed.	effective date, but not an effective time, at 12:	(01 a.m. on the earlier of: (b) The 90th day after
incu.		
• -	2022	
	. 2020	
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HUG 3	. — /	
Aug 5	Signature of a member or authorized repre	esentative of a member