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COVER LETTER

Div	ision of Corpe	prations			
SUBJECT:	Undercover R	oofing "LLC"			
SUBJECT.		Name of Lim	ited Liability Company		
The enclosed	i Anicles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	lence concerning this matter	to the following:		
		Shayne Rozos			
			Name of Person		
		Undercover Roofing "LLC	*!*		
			Firm/Company		
		3201 Port Royale Drive S.	STE J		
			Address		
		Fort Lauderdale, FL 33308	3		
			City/State and Zip Code		
		4undercoveroofing@gmail.	com to be used for future annual r	enart natification)	
For further in	nformation con	eerning this matter, please co		eport nonneation)	
Shayne Rozo	os		954 617 at ()	-1616	
	Name of P	erson	Area Code	Daytime Telepho	one Number
Enclosed is a	check for the	following amount:			
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mai</u>	iling Address:		Street Ad	dress:	

TO:

Registration Section

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

Undercover Roofing "LLC"		
(<u>Name of the Limited Liability</u> (A Florida	Company as it now appears on our records. Limited Liability Company)	.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 12/08/2020	and assigned
Florida document number L20000383066	:	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
Undercover Roofing	L.L.C.	5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	- 6 TH
		Fig. 2
		2: 05 S:A[6
Enter new mailing address, if applicable:		3 (3) 3 (
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our records, enter t	he name of the new registere
agent and/or the new registered office address here:	· 	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street address	
		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 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
PRES	Shayne Rozos	3201 Port Royale Dr. S. Fort Lauderdale, FL 33308	🗆 Add
			□Remove
			Change
MGR	Shayne Rozos	3201 Port Royale Dr. S. Fort Lauerdale, FL 33308	Change
			□Remove
			□Change
		SEC TAN	Add T
			Remove
			Change 95
			□Add
			□Remove
			□Change
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			□Remove
			□Change
	·		□Add
			Remove
			Change

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