K21000099270

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COVER LETTER

	gistration Serision of Co			
CHD HEZT.		Maintenance, LLC		
SUBJECT:	•	Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Terry A. Capps, Jr.		
			Name of Person	
	Name of Person C&T Roof Maintenance, LLC Firm/Company 1314 S Prairie Circle Address Deltona, Florida 32725 City/State and Zip Code			
			Firm/Company	
		1314 S Prairie Circle		
			Firm/Company le Address 7725 City/State and Zip Code com ddress: (to be used for future annual report notification)	
		Deltona, Florida 32725		
		forareason2@gmail.com		
			·	ort notification)
For further ii	nformation c	concerning this matter, please c	all:	
Terry A. Capps, Jr.		386 301-8- at ()		
	Name o	of Person	Area Code I	Daytime Telephone Number
Enclosed is a	a check for t	he following amount:		
□ \$25.00 H	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional dopy is enclosed)
	iling Addres		<u>Street Addr</u> Registratio	
	_	Corporations	-	f Corporations
P.C	D. Box 632	27	The Centre	e of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C&T Roof Maintenance, LLC		
(<u>Name of the Limited Lis</u> (A Flo	ability Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabilit Florida document number L21000099270		1, 2021 and assigned
his amendment is submitted to amend the following	ā.	
A. If amending name, enter the new name of the	limited liability company here:	
All-Stars Xterior Cleaning Service, LLC		
he new name must be distinguishable and contain the words "	"Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	<u> </u>	
Principal office address MUST BE A STREET AD	 -	
· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
3. If amending the registered agent and/or registongent and/or the new registered office address her		ds, <u>enter the name of the new regist</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida și	treet address
	r.mer r arrata si	TELI WIMITESS
		, Florida Zip Collè
	ϵ_{ny}	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Sheila C Turner	1314 S Prairie Circle	□Add
		Deltona, Florida 32725	■Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
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			□Remove
			□Change
			□Add
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			□Remove
			□Change

				
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Effective date, if other than the fan effective date is listed, the date mutofole: If the date inserted in this blocument's effective date on the D	st be specific and cannot be pri- ock does not meet the appl	icable statutory filing requ		
record specifies a delayed effectiv Lis filed.	e date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90th c	lay after the
ated April 12	2021			
Jerry	a Carps	horal representative of a p	nember	
(Signature of a member or aut	nother representative of a fi	eme.	