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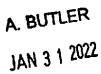
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	CONSTRUCTION AND ROOF!	NG LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	CHAD CHAUNCEY		
		Name of Person	
	CHAUNCEY, PERONTO	& CO., CPAs, PA	
		Firm/Company	
	212 LAKE HARRIS DR		
	<del></del>	Address	
	LAKELAND, FL 33813		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	CHAD@CHAUNCEYCPA		
	E-mail address: (	to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
CHADD CHAUNCEY	C, CPA	863 648-0123 at ()	
Name	of Person	Area Code Daytin	e Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAULT CONSTRUCTION AND RO	OFING LLC		9.90 (************************************
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears o bility Company)	our records.)
The Articles of Organization for this Limited Liab			
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of t	he <u>limited</u> liabili	ity company here	:
UPGRADE DEVELOPMENT, LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability	y Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	130 SERENITY L	OOP, APT 107
(Principal office address MUST BE A STREET		LAKE WALES. F	L 33859
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	130 SERENITY L LAKE WALES, F	
B. If amending the registered agent and/or regagent and/or the new registered office address  Name of New Registered Agent:	gistered office ad here:	ddress on our rec	ords, enter the name of the new registered
	130 SERENITY	LOOP, APT 107	
New Registered Office Address:			a street address
	LAKE WALES		, Florida 33859
		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
AMBR	CHRISTOPHER P COSCIA JR	130 SERENITY LOOP, APT 107	₹Add
		LAKE WALES, FL 33859	□Remove
			Change
		<u> </u>	
			□Remove
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			Change
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			□Remove
			□Change

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Signature of a member or authorized representative of a member	ited			4 -	— <i>\91</i>	\ \dagger \dag					

Filing Fee: \$25.00