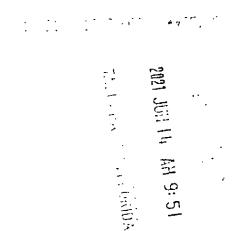
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Benjamin Yetman		
		Name of Person	
	RE-ROOFIT LLC		
		Firm/Company	
	5500 Military Trail, Ste 22	-221	
		Address	
	Jupiter, Florida 33458		
		City/State and Zip Code	
	info@re-roofit.com		
	E-mail address: (	to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	all:	
Benjamin Yetman		561 223-1444	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		·
■ \$25.00 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		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	-
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RE-ROOFIT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 8, 2021 and assigned Florida document number L2100110833 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 "L.L.C Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 9 Enter new mailing address, if applicable: (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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_, Florida \_\_\_\_

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
MGR	Benjamin Yetman	5500 Military Trail, Ste 22-221, Jupiter, Fl 33458	<b>=</b> Add
			□Remove
			□Change
MGR	Christopher Embick	220 VENUS ST, SUITE 4, JUPITER, FL 33458	<b>=</b> Add
			□Remove 2021 ☐Change
MGR Embick Enterprises Inc	220 VENUS ST, SUITE 4, JUPITER, FL 33458	∄Add ,	
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ffective date, if other than tl	he date of filing: March 8, 2021	(	(optional)	
an effective date is listed, the date notes.  Ote: If the date inserted in this.	nust be specific and cannot be prior to date block does not meet the applicable s	e of filing or more than 90 day tatutory filing requirement	s after filing.) Pu is, this date wil	irsuant to 605.02 Il not be listed
ocument's effective date on the	Department of State's records.			
1 10 11 1 00	d La La La Contra	. 12.61	. C. (I.) Th. O	Oct
record specifies a delayed effect is filed.	tive date, but not an effective time, a	(12:01 a.m. on the earner	or: (b) The A	our day after ti
	2021			
June 3rd				
ated				
	Signature of a member or authorized			

Filing Fee: \$25.00