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(Re	equestor's Name)	•
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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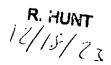


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COVER LETTER

TQ:		istration Sec sion of Cor			
arin in	~~	REDTAIL	ROOFING LLC		
SUBJE	CT:		Name of Lim	ited Liability Company	
The end	elosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	return	all correspo	ndence concerning this matter	to the following:	
			ADRIAN MIDDLETON,	ESQ	
				Name of Person	
			SWORD & SHIELD LLC		
				Firm/Company	
			1437 MARKET ST		
				Address	อเขาัร์เอห 2023 DEC
			TALLAHASSEE, FL 323	12	DIVISION OF CI
	0 Pr CC				
			BIZ@SWORDANDSHIEL		С (д ў 141 г. 40 Сонярокалэнс
.				to be used for future annual report notification)	# \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
For furt	ther in	itormation co	oncerning this matter, please ca	air:	ō X
ADRIA	AN M	IDDLETON	, ESQ	850 815 0256 at ()	
		Name of	f Person	Area Code Daytime Telephone Number	
Enclose	ed is a	check for th	ne following amount:		
■ \$25	5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
	Reg Div P.O	ling Addres gistration S rision of C D. Box 632 lahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 83 Tallahassee, FL 32303	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REDI AIL ROUFING LLC			
(<u>Name of the Limited Liabili</u> (A Flonds	ty Company as it now appears on a Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Colorida document number L21000171974	Company were filed on 04/20/2	2021 and ass	igned
This amendment is submitted to amend the following:	<u> </u>		
A. If amending name, enter the new name of the lim	ited liability company here:		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	ation "LLC" or the abbreviation "L.	L.C."
inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDI	RESS)		
		202	<u> </u>
		33 0F	0.05
nter new mailing address, if applicable:		 دی س	- 유로-
Aailing address MAY BE A POST OFFICE BOX)		8	S.J.
		OT III	-
	4	2:	
 If amending the registered agent and/or registered gent and/or the new registered office address here: 	d office address on our recor	ds, enter the name of the new	register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida si	reet address	.
		, Florida	
	City	, FIORIQA 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, <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
MGR	MARTIN, THOMAS		□Add
		7643 GATE PKWY STE 104-177	≣ Remove
		JACKSONVILLE, FL 32256	
			□Add
			□Remove
			□ Change
			Add DIVIS
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ffective date, if other the an effective date is listed, the cote: If the date inserted in ocument's effective date or	tate must be specific and this block does not n	d cannot be prior to neet the applicab		ore than 90 days af		
cument's effective date of	i die Department of 3	nate s records.				
ecord specifies a delayed of is filed.	effective date, but not	an effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90th day af	ter the
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