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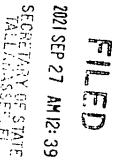
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COVER LETTER

TO:

Registration Section Division of Corporations

HARBOR SUBJECT:	ROOFING GROUP. LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	BRIAN J. HAYES		
		Name of Person	
		Firm/Company	
	P.O. BOX. 1114		
	VERO BEACH, FL 3296	Address	
	VERO BEACH, FL 3290	City/State and Zip Code	
	brian@havesgroupinc.com	to be used for future annual report notification)	
For further information c	oncerning this matter, please c	·	
Brian J. Hayes		at () 226-0061 Area Code Daytime Telephone Number	
Name o	f Person	Area Code Daytime Telephone Number	
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certified Copy Certificate of Certified Copy (additional copy is enclosed) Certified Copy (additional copy (additional copy))	f Status & py
Mailing Addres Registration 9 Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632 Tallahassee, 1	.7	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HARBOR ROOFING GROUP, LLC

company has been notified in writing of this change.

•	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li. Florida document number 1.21000311558	ability Company were filed on JULY 7, 2021	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or th	e abbre Mation 22 L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	AAA 2
		X SEE SI
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	
	egistered office address on our records, <u>enter the n</u>	ame of the new register
B. If amending the registered agent and/or re agent and/or the new registered office addres	<u>s here</u> :	
	s here:	
gent and/or the new registered office addres	Enter Florida street address	
Name of New Registered Agent:		Zip Code

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

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>	<u>Address</u>	Type of Action
AMBR	BRIAN J. HAYES	1525 56TH COURT	
		VERO BEACH, FL 32966	■Remove
			□Change
MGR	MGR BRIAN J. HAYES	1525 56TH COURT	■Add
		VERO BEACH, FL 32966	□Remove
			☐ Change
			🗆 Add
			□Remove
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te: If the date is	other than the date isted, the date must be sp iserted in this block do we date on the Departn	es not meet the	applicable statute	ling or more than 9 ory filing require	(optional) Odays after filing.) ments, this date v	Pursuant to 605.0207 rill not be listed as
cord specifies a s filed.	delayed effective date.	but not an effec	ctive time, at 12:0	OI a.m. on the ca	rlier of: (b) The	90th day after the
sed SEPTEMBI	ER 17	2021	·			
			-		. . .	
	Signat	ure of a member of	or authorized repre	sentative of a mem	DUT	
	()					

Filing Fee: \$25.00