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SECRETARY OF STATE STATE OF CORPORATIONS

T. MATTHEWS MAY 3 1 2022

COVER LETTER

TO: Registration Se Division of Cor			••
	TERPROOFING LLC		•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	ALELY GARCIA		
		Name of Person	11 FE
	TECH WATERPROOFIN		
		Firm/Company	
	15629 SW 98TH TER		
		Address	
	MIAMI FL 33196		
		City/State and Zip Code	
	CGARCIA-GIL@ATT.NE		
For further information c	n-mail address: (oncerning this matter, please c	to be used for future annual report not all:	nfication)
ALELY GARCIA	Ç .	305 370-9762	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9		<u>Street Address:</u> Registration Sc	ection
Division of C	forporations	Division of Co	rporations
P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	Fallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION SECRETARY DE STATE DIVISION OF CORPORATIONS

22 APR 19 AM 9: 59

TECH WATERPROOFING 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 L	liability Company we	re filed on 04/12/2022	and assigned
Florida document number L22000081640	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability C	Company." the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	<u></u>	
(Principal office address MUST BE A STREI	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address.	registered office add		enter the name of the new registered
Name of New Registered Agent:	ALELY GARCIA		
New Registered Office Address:	15629 SW 98TH T	ER Enter Florida street o	oddross
	MIAMI		
		Спу	Florida ³³¹⁹⁶ Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registery provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete per istered agent as pro- registered office add	rformance of my dution wided for in Chapter (es, and I am familiar with and 605, F.S. Or, if this document is

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	CARLOS M GARCIA	15629 SW 98TH TER MIAMI, FL 33196	□Add
			■Remove
			□Change
MGR	ALELY GARCIA	15629 SW 98TH TER MIAMI, FL 33196	
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
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Filing Fee: \$25.00