## L22000204290

(R	lequestor's Name)	<del></del>
(A	.ddress)	
(A)	ddress)	
(0	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(C	Occument Number)	
Certified Copies	Certificates of S	Status
Special Instructions to	o Filing Officer:	





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A. BUTLER AUG 2 5 2022

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

ROOF AR SUBJECT:	MY OF FLORIDA LLC •		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JOSHUA A. MILLER		
		Name of Person	
		Firm/Company	
	225 NORTH PACE BLVI	O, SUITE 106	
		Address	
	PENSACOLA, FL 32505		
		City/State and Zip Code	
	JMILLER@ROOFARMY		
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
JOSHUA MILLER		850 377-4801 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of O P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FileD

ROOF ARMY OF FLORIDA LLC

2022 AUG 25 PK 1:28

( <u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)  Liability Company)  Liability Company)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L22000204290	were filed on 05/16/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
N/A_	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7823 N DALE MABRY HWY
(Principal office address MUST BE A STREET ADDRESS)	SUITE 109
	TAMPA, FL 33614
Enter new mailing address, if applicable:	7823 N DALE MABRY HWY
Mailing address MAY BE A POST OFFICE BOX)	SUITE 109
<del></del>	TAMPA, FL 33614
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter the name of the new regi</u> s
New Registered Office Address:	Enter Florida street address
	Enter Florida street address . <b>Florida</b>

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>	Name	Address	Type of Action
MGR WILLIAM BRENT KYLE	43 CLOVERLEAF STREET	<b>=</b> Add	
		WINFIELD, WV 25213	□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change
<del></del>			
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
		□Remove	
		□Change	
		□Add	
			□Remove
			□ Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  N/A
	<del></del>
(lfan <u>Not</u>	effective date, if other than the date of filing:
If the rec record is	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	ed August 23 . 2022
	Signature of a member or authorized representative of a member
	JOSHUA A. MILLER

Typed or printed name of signee