## 122 000207446

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700393538457

8875, (55--105,--0) - \*\*5-10

PILED
2022 AUG 31 PM 1: 50
SECRETARY OF STATE
TALLAHASSEE, FL

## COVER LETTER

ro:		auon Sec n of Corp	nion Porations		<i>* ' '  </i> ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
	Su	n State Sc	olar and Rooting, LLC				
SUBJEC	CT:	_	Name of Lim	nited Liability Company			
The encl	losed Ar	ticles of A	Amendment and fec(s) are sub	mitted for filing.			
Please re	eturn all	correspor	ndence concerning this matter	to the following:			
			Joseph M McKenna III				
			. 10-1	Name of Person			
			Sun State Solar and Roofin	ng. LEC			
			<del></del>	Firm/Company			
			488 Sugar Ridge Ct				
				Address	<del></del>		
			Longwood, FL 32779				
				City/State and Zip Code			
			joemckennasolar@gmail.co				
				to be used for future annual report no	otification)		
For furth	ner infor	nation co	ncerning this matter, please ea	all:			
Joseph N	м МсКе	nna		407 718-8188			
	-	Name of	Person	at () Area Code Dayti	me Telephone Number		
Enclosed	licacho	ok for the	following amount:				
	.00 Filing			□ #55 00 PW D D	<b>-</b>		
<b>yn</b> , 325.	oo riinį	g ree	\$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)		
		Address:		Street Address:			
		ration Se		Registration Section			
		on of Co ox 6327	rporations	Division of Co The Centre of	•		
	1 .U. D	ひん ひろん /		rne Centre of	rananassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sun State Solar and Roofing, LLC					
(Name of the Limited (A	Liability Compa Florida Limited	any as it now appe Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liab	ility Company	y were filed on $\frac{N}{2}$	1ay 2, 2022	and assigned	
Florida document number 1.22000207446					
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	e limited liab	oility company l	<u>nere</u> :		
The new name must be distinguishable and contain the word	ls "Limited Liabi	ility Company," the	designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicab	488 Sugar Rid	ge Ct			
(Principal office address MUST BE A STREET A	<u>ADDRESS)</u>	Longwood, FI.	. 32779		
Enter new mailing address, if applicable:		488 Sugar Rid	ge Ci		
(Mailing address MAY BE A POST OFFICE BO	Longwood, FL 32779				
B. If amending the registered agent and/or regi agent and/or the new registered office address h	stered office : <u>tere</u> :	address on our	records, <u>enter the nan</u>	S 31 AHAS	
Name of New Registered Agent:		<del></del>	·	SEP ST	
New Registered Office Address:	488 Sugar Ridg		orida street address	: <b>5</b> 0	
ı	Longwood			m —	
-		City	, Florida 32	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, 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
	<u> </u>		🗆 Add
			Remove
			Change
			[]\/dd
			□Remove
			□Add
			□ Remove
			[]Change
<del></del>		-11-0	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			⊡Remove
			[]Change
			□Add
			CRemove
			□Change
<del></del>			□Add
			□Remove
			[]/ home

· · · · · · · · · · · · · · · · · · ·			<del> </del>	
		····-	· · · · · · · · · · · · · · · · · · ·	
				<del></del>
<del></del>				
	· · ·	·		
<del></del>				
		<del></del> -		<del>.</del>
_				
<u></u>				
Effective date, if other than the if an effective date is listed, the date many mote: If the date inserted in this the document's effective date on the light	ust be specific and cannot be p block does not meet the ap	orior to date of filing or a plicable statutory filin	(optional nore than 90 days after filing ng requirements, this date	.) Pursuant to 605,0207 (
e record specifies a delayed effecti rd is filed.	ive date, but not an effectiv	ve time, at 12:01 a.m.	on the earlier of: (b) T	he 90th day after the
Dated August 23	2022			
1.0	200	2		
A 4// Z				
109	Signature of a member or a	uthorized representative	of a member	<del></del>

Filing Fee: \$25.00