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## **COVER LETTER**

TO: . Registration Section

Division of Cor	porations			
SUBJECT: AV	ENTURA RO	DOFING Q (	on STRUCTION	220
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Joh	Name of Person	<u> </u>	
	20355	Firm/Company NE 34th C	T APT 428	
	Aventuraç E-mail address: (	City/State and Zip Code  Rooting @ I cloud to be used for future annual report notion	d, com	
For further information c	oncerning this matter, please c			
John Name o	FLI Person	at (784) 826 Area Code Daytim	- 876 L ne Telephone Number	
Enclosed is a check for the	ne 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 Addres Registration 9 Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of T	rporations	
Tallahassee, l			e Street. Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF ORGANIZATION
OF Section 1
A Ventura Roofing a Coustruction Legistre (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
To 14 the assistant
The Articles of Organization for this Limited Liability Company were filed on June 14 th 2022 and assigned florida document number 421000 2713
Torida document number 4 4 500 3 +11 70
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new reg</u> istered gent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
New Registered Agent's Signature, if changing Registered Agent:
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 Changing Registered Agent, Signature of New Registered Agent

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	Johnny ELi	20355 NE39th CIV Aventura Florida 39180	- APT 488
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an effec	tive date is listed.	r than the date the date must be sp ed in this block d	pecific and	cannot be p	rior to date o	f filing or mor	e than 90 day	s after filing	.) Pursuant to	605.020 listed a
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