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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

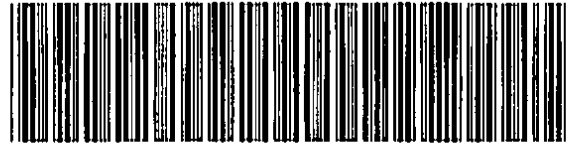
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FEB 2 - 2023

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SECRETARY OF STATE  
2022 NOV -7 PM 2:30

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** DHR Roofing LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bryan Cohen

Name of Person

BDC & Associates LLC

Firm/Company

1314 E. Las Olas Blvd #1098

Address

Fort Lauderdale, Fla. 33301

City/State and Zip Code

sr84@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryan Cohen

954

610-9748

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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 add or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR/ AM	Bryan D. Cohen	1314 E. Las Olas Blvd #1098	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, Fla. 33301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	William J. Hadley III	4460 Copper Hill Dr.	<input type="checkbox"/> Add
		Spring Hill, Fla. 34609	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Barry Cleveland Dailey	3138 S 76th East Ave	<input checked="" type="checkbox"/> Add
		Tulsa, Ok 74145-1241	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

**E. Effective date, if other than the date of filing:** 11/02/2022 (optional)

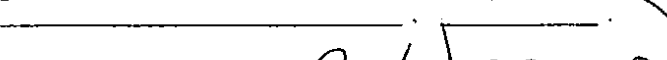
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 11/02 2022

2022



Signature of a member or authorized representative of a member

Mary C Wassong

Mary C Wassong

Typed or printed name of signee