## L22 000 502 730

(Re	equestor's Name)	
(Ac	dress)	<u> </u>
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: Treasure C	oast Roofing & Sheet Metal L.	L.C.	
		ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sokol Dulovi		<u> </u>
		Name of Person	
	Treasure Coast Roofing &	Sheet Metal L.L.C.	
		Firm/Company	
	9954 Watermill Cir A		
	9954 Watermin Cir A	Address	
	Boynton Beach, FL 33437	City/State and Zip Code	
	admin@southcounty-roofin		
	-	to be used for future annual report not	ification)
For further information of	concerning this matter, please ca	di:	
Sokol Dulovi		at (561 ) 452-2129 Area Code Daytin	
Name o	f 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		Street Address: Registration So	ection
Division of C	Corporations	Division of Co The Centre of	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Treasure Coast Roofing & Sheet Metal L.L.C.		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records. imited Liability Company)	,
Γhe Articles of Organization for this Limited Liability Cor	mpany were filed on 11/29/2022	and assigned
Florida document number L22000502730	e.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
SCR & Sheet Metal LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDRE</u>	<u> </u>	0246
		;
Inter new mailing address, if applicable:		<del></del> -
·		
Mailing address MAY BE A POST OFFICE BOX)		• •
		2
<ol> <li>If amending the registered agent and/or registered of gent and/or the new registered office address here:</li> </ol>	office address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:	<del></del>	
New Registered Office Address:	0.00.1	
	Enter Florida street address	
	, Flo	rida
	City	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 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 added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			🗀 Add
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		· · · · · · · · · · · · · · · · · · ·	□Remove
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. If ame:	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ell-	ve date, if other than the date of filing:  (optional)  retive 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the record cord is fil	I 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 ed.
Dated	04/06
	5
	Signature of a member or authorized representative of a member
	SOKOL DULOVI  Typed or printed name of signee

Filing Fee: \$25.00