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## **COVER LETTER**

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TO: Registration Section

Div	ision of Cor	porations		
	American M	Made Gutters, LLC		
SUBJECT:		Name of Lim	ited Liability Company	···
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleasc return	all correspo	ndence concerning this matter	to the following:	
		Michael DeMougin		
			Name of Person	
		American Made Gutters, I	LC	
			Firm/Company	
		4700 Seminole Trail		
			Address	
		Merritt Island, FL 32953		
			City/State and Zip Code	
		Mike@AmericanMadeGutt		
For further in	formation c	E-mail address: ( oncerning this matter, please c	to be used for future annual report no	offication)
		oncerning this matter, picase c		
Michael Del			321 617-1747 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
<b>≡</b> \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres		Street Address: Registration S	ection
_	<del>-</del>	orporations	Division of Co	
P.C	). Box 632	7	The Centre of	Tallahassee
Tal	lahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

American Made Gutters, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{01/31/2023}{1}$ and assigned Florida document number \_\_\_\_\_\_\_L23000057602 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Michael DeMougin Name of New Registered Agent: 4700 Seminole Trail New Registered Office Address: Enter Florida street address \_\_, Florida <sup>32953</sup>
Zip Code MerrittIsland

## 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.

Cin

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>	Name	Address	Type of Action
MGR	Michael DeMougin	4700 Seminole Trail	
		Merritt Island, FL	
		32953	■ Change
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			□Change

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Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior  Note: If the date inserted in this block does not meet the application document's effective date on the Department of State's records.	to date of filing or more than 90 days after filing.) Pursuant to 605.0207
e record specifies a delayed effective date, but not an effective tired is filed.	ne, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 2024	
	rized conceptative of a manufacture
Signature of a member of author	rized representative of a member