L23000113116

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COVER LETTER

TO:	Registration Sec Division of Corp		f *	•
		SALES, LLC		
SUBJEC	T:	Name of Limi	ted Liability Company	
The encl	osed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspor	idence concerning this matter	to the following:	
		KIMBERLY COUGHLIN		
			Name of Person	
		COUGHLIN SALES, LLC		
			Firm/Company	
		1466 NE 54TH STREET		
			Address	
		FORT LAUDERDALE, F	L 33334	
			City/State and Zip Code	
		kimberly@bisonroofingand		(Anntina)
			o be used for future annual report noti	neation)
For furth	er information co	ncerning this matter, please ca	alt:	
KIMBE	RLY COUGHLII	V	954 504-1497 at ()	
	Name of	Person		e Telephone Number
Enclosed	l is a check for the	e 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 S Division of Co	ection orporations	Street Address: Registration Seduction of Control of The Control o	porations
	P.O. Box 6323 Tallahassee, F		The Centre of T 2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

COUGHLIN SALES, LLC		
(Name of the Limi	led Liability Company as it now appears on our re (A Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited L		and assigned
Florida document number L23000113116		
his amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
he new name must be distinguishable and contain the v	words "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	
Principal office address MUST BE A STREE	ET ADDRESS)	
		: ::::::::::::::::::::::::::::::
		:
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	BOX)	- P
		<u> </u>
		<u></u>
B. If amending the registered agent and/or agent and/or the new registered office addre		nter the name of the new regist
Name of New Registered Agent:	KIMBERLY COUGHLIN	
New Registered Office Address:	Enter Florida street a	uddress
		, Florida
	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.

MINDERLY COUGHW
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
MGR	ADAM COUGHLIN	1466 NE 54TH STREET	
		FORT LAUDERDALE, FL 33334	= Remove
			□Change
MGR	KIMBERLY COUGHLIN	1466 NE 54TH STREET	🗏 Add
		FORT LAUDERDALE, FL 33334	□ Remove
			□Change
<u>-</u> _			
			□Remove
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(optional) ys after filing.) Pursuant to 605.02 its, this date will not be listed
of: (b) The 90th day after th

Filing Fee: \$25.00