

L23000187892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

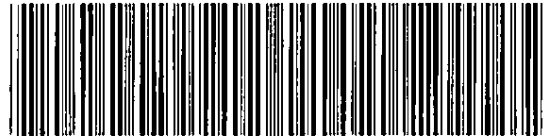
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/26/2023 15:01:15 **21.01

2023 OCT 26 PM 5:26

4/12/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Catalyst 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:

Kris Bollinger
Name of Person

Catalyst Roofing LLC
Firm/Company

5313 Congo CT
Address

Cape Coral FL 33904
City/State and Zip Code

Kris@catalystroofing.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kris Bollinger at (239) 633 2571
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

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	April Bollinger	5313 Congo CT	<input type="checkbox"/> Add
		Cape Coral FL 33904	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alexis Munoz	1137 SW 19 Ave	<input checked="" type="checkbox"/> Add
		Cape Coral 33911	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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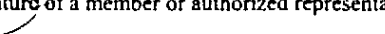
[illegible]

(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)

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 October 18, 2023


Signature of a member or authorized representative of a member


Kris Bollinger
Typed or printed name of signee

Filing Fee: \$25.00