L24000382739

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Y 10/22/2004

COVER LETTER

TO: Registration S Division of Co				
Aggressive	e Installers, LLC			
Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Stacy Del Favero			
		Name of Person		
	Aggressive Installers, LLC			
		Firm/Company		
	6927 Alpert Drive			
		Address	···	
	Orlando, FL 32810			
		City/State and Zip Code		
	stacyd@thepenitentthief.or			
For further information	E-mail address: concerning this matter, please o	(to be used for future annual report no call:	otification)	
Stacy Del Favero		352 267-8608		
Name	of Person		me Telephone Number	
Enclosed is a check for t	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 Addre	·	Street Address:	action	
Registration Section Division of Corporations		Registration S Division of Co		
P.O. Box 6327		The Centre of	The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Mont	oe Street, Suite 810	

Tallahassee, FL 32303

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

Aggressive Intallers, LLC

AGGRESSIVE INSTALLERS LLC

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(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited	Liability Company)	2
·		
The Articles of Organization for this Limited Liability Company	y were filed on 8/30/2024	and assigned
Florida document number L24000382739		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
EOS Installers, LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		
Trincipal Office address most 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 t	the name of the new register
agent and/or the new registered office address here:	address on our records, emer-	ne name of the new register
Name of Naw Pagistared Agent		
Name of New Registered Agent:	,,,	
New Registered Office Address:		
	Enter Florida street address	
	. Flo	rida
	City	ridaZip Code
New Registered Agent's Signature, if changing Registered Agent	:	
	_	T
hereby accept the appointment as registered agent and ag	ree to act in this capacity. I fur	ther agree to comply with

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

Title '	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			Remove
			Change
			□Add
			□ Remove
			Change
			□ Remove
			☐ Change
		 	□ Add
			□Remove
			Change
		-	
			□ Remove
			Change
			□ Remove
			□ Change

D. If amending any other informa	tion, enter change(s) here: (Al	ttach additional sheets, if necess	ary.)
		.	
			
			
		· · · · · · · · · · · · · · · · · · ·	
			
E. Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De	it be specific and cannot be prior to date ook does not meet the applicable s		ing.) Pursuant to 605.0207 (3)(b
f the record specifies a delayed effective record is filed.	e date, but not an effective time, al	12:01 a.m. on the earlier of: (b)	The 90th day after the
September 30 Dated	2024		
Lag Delo	Signature of a member or authorized	representative of a member	
Stacy Del Favero	-	•	
	Typed or printed nam	ne of signee	