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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:					
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRENDAN BOYLE L.L.C.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brenden Boyle L.L.C.

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

(A rionda Limited L	навину Сотрану)		
The Articles of Organization for this Limited Liability Company of Florida document number M22000003934	were filed on 03/14/22	and assigned	
This amendment is submitted to amend the following:			
$\widehat{\mathbf{A}}.$ If amending name, enter the new name of the limited liabl	lity company here:		
Blue Ocean Roofing LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty 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:		202 4	
(Mailing address MAY BE A POST OFFICE BOX)			
Action of the Control			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·	
	, Florio	da Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	¥		
	on to act in this canneity I footh	er garee to comply with	
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I furth	er agree to comply with i	

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.

6/17/2024 12:03:17 PDT

To: 18506176383

Page: 3/4

Fax: 8134365206

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
			□Rcmovc
			□Change
			□Add
			□Remove
			Change
<u></u>	_		□Add
; i `	· <i>r</i> ·		
•			□Add
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			□Change
			□Add
			□Remove
25. 1 kg	* g*_*		☐ Change
**-··-·	-		□Add
(*) 			□Remove

D. If amending any oth	er information, enter change(s) here: (Attach additional sheets, if necessary.)

: : : : : : : : : : : : : : : : : : :	
Note: If the date insert	than the date of filing: (optional), 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)(and in this block does not meet the applicable statutory filing requirements, this date will not be listed as the stee on the Department of State's records.
f the record specifies a delacecord is filed.	yed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated June 17th	2024
	Signature of a member or authorized representative of a member
Nat Smith	
	Typed or printed name of signee