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10/30/23, 3:23 PM

Division of Corporations



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kathy@apiprocessing.com Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LEGRAND'S ROOFING LLC

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OCT 3 1 2023

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

LEGRAND'S ROOFING LLC	
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	s.)
The Articles of Organization for this Limited Liability Company were filed on	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
LEGRAND'S ROOFING & CONSTRUCTION LLC	
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 RE 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, <u>enter agent and/or the new registered office address here</u> :	the name of the new register.
Name of New Registered Agent:	
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·
Enter Florida street address	s CO No prida +
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.

If Changing Registered Agent, Signature of New Registered Agent

10/30/2023 18:45 HO.465 #083

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_____ Change

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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 = Mai AMBR = Aut	nager horized Member		
Title	Name	Address	Type of Action
			□Add
			DRemove
		 	□Change
			🗀 Add
			ORemove
			Change
			DRemove
		• • • • • • • • • • • • • • • • • • • •	🗆 Change
			□Remove
			[I] Change
			DAdd
			□Remove
			©Change
			DAdd
			©Rumove

D. If amending	nny other information, enter change(s) here: (Attach additional sheets, if necessary.)	

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· ************************************		
Note: If the da	if other than the date of filing:	3)(b) he
If the record specific record is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the	
Dated Oct 3	0, 2023	
	Cigue	
	Signature of a member or anthorized representative of a member	
	CARLOS J. LEGRAND	

Filing Fee: \$25.00 H23000377540 3

Typed or printed name of signee