LU4 00000 1328

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Enuty Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

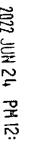
Office Use Only



300389873653

90/24/03 -80 12 -909 *#20.00

SECTION 24 THEFT



COVER LETTER

	gistration Scrision of Cor		•	•		
end heet.	CNR ROOFING, LLC					
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		CHARLES GRIMES				
			Name of Person			
		CNR ROOFING, LLC				
			Firm/Company			
		9533 WATERSHED DRIV	VE NORTH			
			Address			
		JACKSONVILLE, FLORI	DA 32220			
			City/State and Zip Code			
		GRIMESROOFING75@GI				
For further i	nformation c	E-mail address: { oncerning this matter, please c	to be used for future annual report no ail:	ottlication)		
CHARLES:		oncerning was market present a	904 591-5746			
CHARLIS			at ()			
	Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed is:	a check for th	ne following amount:				
■ \$25.00 I	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)		
	iling Addres		Street Address:	antlan		
	gistration S vision of C	Section Corporations	-	Registration Section Division of Corporations		
). Box 632	-	The Centre of	-		
Ta	llahassee. l	FL 32314	2415 N. Mont	roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JUH 24 PM 12: 27

CNR ROOFING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on January 7, 2004 ____ and assigned Florida document number L04000001328 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 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 the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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>	Name	Address	Type of Action
MGMR	AMANDA GRIMES	7048 OLD PLANK ROAD	
		JACKSONVILLE, FLORIDA 32254	≡ Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
			□Remove
			☐ Change
			Remove
			□Change
			□Add
			□Remove
			☐ Change

				
- parameter man				
				
				26
				1 22 JU
		_	_	2022 JUN 24
		_		
				PH 12: 2
	· · · · · ·			
				-1
				
Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the Defective date.	ock does not meet the applica	o date of filing or more than ble statutory filing requi	(optional) 90 days after filing.) Pur rements, this date will	suant to 605,0207 not be listed as t
e record specifies a delayed effectiv rd is filed.	; date, but not an effective tin	ne, at 12:01 a.m. on the c	earlier of: (b) The 90	th day after the
Dated JUNE 22	2022			
Dailed				
Dated 22 Chal- 1	,			

Filing Fee: \$25.00