## [18000273847

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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	of Status
Special Instructions to Filin	g Officer:	
LLC		
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Corporations					
SUBJECT:	NEXGEN ROOF	FING, LLC			
30b/LC1		Name of Lim	ited Liability Company		
The enclosed A	Articles of Amend	lment and fee(s) are sub	mitted for filing.		
Please return a	ll correspondence	concerning this matter	to the following:		
		Brandon Cornel	lier		
	_		Name of Person		
		NEXGEN RO			-
			Firm/Company		
		2862 Ballard G	Oaks Jacksonville, FL		
			Address		
		Jacksonville, F			
		brandon@nexg	City/State and Zip Code enfl.com		
		•	to be used for future annual	report notification)	
For further info	ormation concern	ing this matter, please ca	all:		
Brandon	Cornellier		at ( <u>239</u> )	851-5546	
	Name of Person		Area Code	Daytime Telepho	one Number
Enclosed is a c	heck for the follo	wing amount:			
S25.00 Fil Fee	ing □ \$	30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee of Certified Copy (additional copy is enc		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ng Address:	n.	Street A		
Divis	stration Section sion of Corpora		Divisio	Registration Section Division of Corporations	
	Box 6327 hassee, FL 32	314		ntre of Tallaha: . Monroe Stree	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEXGEN ROOFING, LLC	FILED	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records.)	
(A Fronta Danico	2024 DEC 30 PM 1:1	<b>+6</b>
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number <u>L18000273847</u>	TALLAHASSEE, FI	-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	10527 Craig Industrial Drive	····
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32207	<del>_</del>
Enter new mailing address, if applicable:	10527 Craig Industrial Drive	
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32207	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		
N 0 1 1007 A 11		
New Registered Office Address:	Enter Florida street address	1877
	Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agroup provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as placing filed to merely reflect a change in the registered office	performance of my duties, and I am provided for in Chapter 605, F.S. Or.	familiar with and , if this document is

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

	ved from our records:	attorized to manage, enter the tisie, manie, and a	itteress of each person	oemg added
	Manager = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type	of Action

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<u>vote:</u>	re date, if other than the date of filing:
record d is file	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 d.
ated _	Navember 20 . 2024.
	Signature of a member or authorized representative of a member
	· ·

Filing Fee: \$25.00