Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230002221073)))



t230002221073ABCT

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To:

Division of Corporations

Fax Number

: (850)617-6383

from:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address:_contact@medeirossouza.com

021 JUN 2 I PM 3: 36 DEPARTMENT OF STATE IVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COLUMN L&P PRATA CONSTRUCTION, LLC

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JUN 2 2 2023

Registration Section

Tallahassee, Fl. 32314

TO:

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

Division of Cor	rporations		
NEXT AL	UMINUM SUPPLY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	
	Medeiros Souza corp		
		Firm/Company	
	1711 Amazing Way, Ste 2	13	
		Address	
	Ococc, FL 34761		
		City/State and Zip Code	
	contact@medeirossouza.com		
		to be used for future annual report no	tification)
For further information c	oncerning this matter, please of	all:	
Rubem Souza		407 326 - 8484	
Name o	f Person	at ()	me Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddres</u>		StreetAddress:	
Registration S		Registration S	
Division of C P.O. Box 632		Division of Co The Centre of	
1.0.1007.005	,	THE COURT OF	1 GIIGIIGGGCC

Page: 5 of 7

From: RUBEM SOUZA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L&P PRATA CONSTRUCTION, ELC				
(Name of the Limited Liability Comme (A Florida Limited	ny a <u>s it now appears on our records.)</u> Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 12/04/2018	andassigned		
Florida document number L18000278788				
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	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1711 Amazing Way			
(Principal office address MUST BE A STREET ADDRESS)	SS) Sie 213			
	Ococc, FL 34761			
Enter new mailing address, if applicable:	1711 Amazing Way			
(Mailing address MAY BE A POST OFFICE BOX)	Sie 213	- 2		
	Ococe, FL 34761	ಜನ ಕ್ಷಮ		
B. If amending the registered agent and/or registered office a	address on our records, <u>enter th</u>	e name of the new register		
agent and/or the new registered office address here:		- FM 23		
Name of New Registered Agent:		<u> </u>		
New Registered Office Address:		12 =		
	Enter Florida street address	· 10 C		
	, Flori	da <u></u>		
	City	Zip Coch-		

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.

Page: 6 of 7

2023-06-21 20 48:49 GMT

14076046519

_____ □Change

To:

From: RUBEM SOUZA

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 = Ma AMBR = Au	nager thorized Member		
Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□ Change
			□Add
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ffective date, if other than	the date of filin	41 •		(optiona	I)	
an effective date is fisted, the date ofe: If the date inserted in the ocument's effective date on the	must be specific and is block does not a	d cannot be prior to meet the applicab		nan 90 days after filir	ig.) Pursuant to 605.02	
record specifies a delayed effi Lis filed	ective date, but not	t an effective time	e, at 12:01 a.m. on th	e earlier of: (h)	The 90th day after th	10
ated Orlando		06/21/2023				
area			, •			

Typed or printed name of signee