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A. BUTLER



COVER LETTER

	ision of Cor				
CUD IEZT.	MIAMI FL	ORIDA METAL ROOFING, I	LLC.		
NOBJECT,		Name of Lim	ited Liability Company		
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for tiling.		
		ndence concerning this matter	-		
		ALDIN Y MEJIA			
			Name of Person		
		MIAMI FLORIDA META	L ROOFING, LLC		
			Finn Company		
		16267 SW 157 AVENUE			
			Address		
		MIAMI, FL 33187			
			City/State and Zip Code		· · · · · · · · · · · · · · · · · · ·
		MIAMIFLORIDAME CALI	***		
			to be used for future annual	report notific	cation)
bor further in	nformation c	oncerning this matter, please co	all.		
ALDIN Y M	тена		832 60	6-8541	
	Name o	Person	Area Code	Daytime	l'elephone Number
linclosed is a	i check for ti	te following amount:			
■ \$25,00 I	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		© \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres gistration S		Street A Registr	<u>ddress:</u> ation Sect	ion
	-	orporations	-	n of Corp	
). Box 632	•		ntre of Ta	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI FLORIDA METAL ROOFING, LLC

(Name of the Limit of Locality Company as it now apprary on our records.)

A Florida Limited Liability Company)

A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L22000010284</u>	y were filed on 01/07 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street a.	ldress
 -		, Florida
	•	Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my dutie, provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, gnter 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
MGR	ALEJANDRO ONDARZA	3991 ALLERDALE PLACE	≣Add
		COCONUT CREEK, FL 33073	
			□Change
			□Add
			⊟Remove
			☐ Change
			CAdd
			[]Remove
			Change
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e record specifies a delayed effect d is filed.	uve date, but n	ot an effective (ime, at 12:01 a.	in. on the earlie:	of: (b) The 90th	h day after the
HINE O		2022				
Dated		- ¹				
Dated JONE 9 Aldin	Signature of	a member or and	notized represents	tive of a member		