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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>HE N Professional Contractors</u> , LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nilka N Rodriguez Name of Person
Firm/Company
1080 Forrest Dr.
Bartow FL 33880 City/State and Zip Code
City/State and Zip Code Noemi 2273 @gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nilka Rodriguez at (863) 860 - 1491 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JUH - 7 AH 11: 09

(Name of the Limited Liability Compa (A Florida Limited)	ntractors, LL iny as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on Februa	ny 17, 2022 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab NEA Remodeling & Cleaning Service The new name must be distinguishable and contain the words Limited Liabil Enter new principal offices address, if applicable:	es fros, LLC lity Company," the designation 1080 Forrest	Drive
(Principal office address MUST BE A STREET ADDRESS)	Bartow, FC	- 3383 <i>0</i>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as	Above
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	address
	City	, Florida Zip Code
	Cuy	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

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>	<u>Name</u>	Address	Type of Action
MGR Higuel A De Jesus, Jr.	Higuel A De Jesus, Jr.	4533 Philadelphia Civ Kissimmee, FL 34746	□Add
		Lissimmee, FL 34746	Ekemove
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Effective	a data if other than the date of Glings
vote: 11	e date, if other than the date of filing:
record : d is filed	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
Dated	June 2nd 2002
	Mula Bodrigues Signature of a member or Athorized representative of a member
	Wilka N Rodrigue 2 Typed or printed name of signee
	NIKA N Modrauez