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(Document Number)
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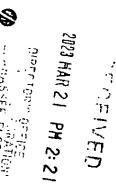
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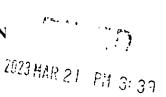
COVER LETTER

TO:

	ion Section of Corporations		
	OE SERVICES LLC		
SUBJECT:	Name of L	Limited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are s	submitted for filing.	
Please return all co	rrespondence concerning this matt	itter to the following:	
	NOE EDGARDO	PAZ - ALFARO	
		Name of Person	_
		Firm/Company	_
	3217 BUCKRUN DR		_
		Address	
	BRANDON FLORIDA	DA, 33511	
		City/State and Zip Code	_
	EDGARDOPAZ408@G		
For further informa	E-mail addres ation concerning this matter, pleas	ess: (to be used for future annual report notification) se call:	
NOE PAZ		813 706-2429 at ()	
1	Name of Person	Area Code Daytime Telephone Numb	er
Enclosed is a chec	k for the following amount:		
■ \$25.00 Filing	Fee ☐ \$30.00 Filing Fee & Certificate of Status	s Certified Copy Certifie (additional copy is enclosed) Certifie	Filing Fee, cate of Status & ced Copy is enclosed)
Mailing /		Street Address:	
-	ntion Section	Registration Section Division of Corporations	
Divisioi P.O. Bo	n of Corporations ex 6327	The Centre of Tallahassee	
	ssee, FL 32314	2415 N. Monroe Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



NOE 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 10/19/2022	and assigned
Florida document number 122000450436		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
NOE SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI	LC" 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:		<u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office	address on our records, <u>ente</u>	er the name of the new register
agent and/or the new registered office address here:		
N ON D Count Asset		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addı	. <u>.</u>
	Enter Florida street addi	ress
	,1	Florida Zip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	
I hereby accept the appointment as registered agent and agr	wee to act in this capacity. I_j	further agree to comply with th

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
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
		<u></u>	□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
			Remove
			□Change

Frective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 does; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a secument's effective date on the Department of State's records. The 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 its filed. AMARCH 21 2023 NOR Edgardo Paz Alfaro Signature of a member or authorized representative of a member NOE EDGARDO PAZ-ALFARO			···	-	<u> </u>	
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Filing Fee: \$25.00