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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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEXT ALUMINUM SUPPLY LLC

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MailingAddress;

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

StreetAddress:

(additional copy is enclosed)

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(additional copy is enclosed)

From: RUBEM SOUZA

From: RUBEM SOUZA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEXT ALUMINUM SUPPLY LLC		
(Name of the Limited Liability Com (A Florida Limited	nany ay it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 03/29/2023	and assigned
Florida document number L23000143182		
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 Lial	bility Company," the designation "LLC" or t	he 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	<u>.</u>	28
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the</u>	
		<u>ب</u> غند
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
rew registered critice i tuateur.	Enter Florida street address	25 Q
	Florida	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Page: 5 of 7

To:

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, E.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.

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 = Manager AMBR = Authorized Member

. _ Page: 6 of 7

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ICARO PINHARES	1711 AMAZING WAY STE 213 B	🖸 Add
		OCOEE, FL 34761	
			□ Change
			□Add
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			□Remove
			□Change
			□Add
		 	□Remove
			Change

D. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
- ,		
- ',		
 Note: If the date inserted in the 	n the date of filing:	605.0207 (3)(listed as the
the record specifies a delayed effected is filed	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day	after the
Dated Orlando	06/06/2023	
	 ,	
<u> </u>	Signature of a member or authorized representative of a member	
Rubem Souza		
Rubem Souza	Typed or printed name of signee	_

2023-06-06 19:16:23 GMT

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From: RUBEM SOUZA

, Page: 7 of 7

To: