L23000354127

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第一章 R. HUNT 08/43/43

COVER LETTER

TO: Registration Se Division of Cor		•	6		
CHIPTIPON	ROOFING, LLC		19		
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:			
	ANDRES LEON				
		Name of Person			
	NOBULL ROOFING, LLC				
	·	Firm/Company			
		Address		20:	113
	JACKSONVILLE, FL 322	56		2023 AUG	SECTAL P
		City/State and Zip Code		ତି 23	
	ACCOUNTING@ALLCNI				KY OF SI
	E-mail address: (to be used for future annual report notif	ication)		
For further information c	oncerning this matter, please c	all:		PH I2: 40	- 高田 - 高田 - 西田
ANDRES LEON		407 7581674		J	Ü
Name o	f Person	at () Area Code Daytimo	: Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
Mailing Addres	5 <u>S:</u>	Street Address:			

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NOBULL ROOFING, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	iny were filed on JULY, 27 2023	and assigned
Florida document number L23000354127		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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	<u> </u>	
		22.2
		IZ3 AUG
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		23
		PHIZ:
		<u>25 83</u>
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ce address on our records, enter the	name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	Zip Code
	City	zip Coae

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 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	JOHN VEGA	2344 FALLING STAR EN	
		GREEN COVE, FL 32043	= Remove
	ALL CONSTRUCTION		□Change
MGR	NORTH FURIOD, INC	9424 BAYMEADOWS RD SUITE 250	= Add
NORTH FURIOR, INC	JACKSONVILLE, FL 32256	□Remove	
			□Change
			SIVISION DE CONTRACTOR DE CONT
			□ A d ()
			Remove
			□Change
		□Remove	
			Change
			□Add
			□Remove
			□Change

Typed or printed name of signee

ANDRES LEON