L24000079303

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(City/State/Zip/Phone #)
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(Business Entity Name)
(Business Entry Name)
(Document Number)
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COVER LETTER

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Tallahassee, FL 32314

TO: Registration So Division of Con			
	NA BOX, LLC		
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:	
	Wendy Boylan		
		Name of Person	
	Connection Holdings		
		Firm/Company	4
	14737 Morgan Close		
		Address	
	Wellington, FL 33414		
		City/State and Zip Code	-
	wendy@ctdotsllc.com		
	E-mail address: (to be used for future annual report r	notification)
For further information of	concerning this matter, please co	all:	
Wendy Boylan	·	919 802-1555	
Name (of Person	at () Area Code Day	time Telephone Number
Enclosed is a check for t	he following amount:		
	■ \$30.00 Filing Fee &	C \$55 00 Filing Fee &	S60.00 Filing Fee,
EJ 523.NO FILING FEE	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration Division of C		Registration : Division of C	
P.O. Box 632	-	The Centre o	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

2024 01 21 21 21 21 03

ROOFS IN A BOX, LLC		
(Name of the Umited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L24000079303	were filed on 13 February 2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	14737 Morgan Close	
(Principal office address MUST BE A STREET ADDRESS)	Wellington, FL 33414	
Enter new mailing address, if applicable:	14737 Morgan Close	
(Mailing address MAY BE A POST OFFICE BOX)	Wellington, FL 33414	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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>	Name	Address	Type of Action
MGR	Jamey Nehring	2437 Danbury Circle	
		Rapid City, SD 57702	□Remove
			□Change
MGR	David Stodolak	2080 S Ocean Dr APT. MPH12	
		Hallandale Beach, FL 33009	□ Remove
			□Change
			DAdd
		<u>.</u>	Remove
			□ Change
			[]Add
	. 1		Remove
			Change
			□Add
			Remove
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tive date, if other than the	date of filing:	r to date of filing or more than	(optional) 90 days after filing.) Pursuant to 60
: If the date inserted in this bloment's effective date on the Do	ook does not meet the applic	able statutory filing requi	rements, this date will not be lis
	e date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day after
filed.			
August 30	2024	<u> </u>	
9,	. .		

Filing Fee: \$25.00

Typed or printed name of signee