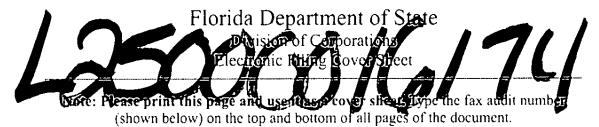
2/20/25, 8:38 AM

Division of Corporations



(((H250000651113)))



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Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NOVA HOME PROS LLC

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T. LEMIEUX

FEB 2 1 2025

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To:

## **COVER LETTER**

TO: Registration So Division of Con			
Nova Hom SUBJECT:	e Pros LLC		
Jobstell	Name of Limi	ted Liability Company	
	Amendment and fee(s) are submondence concerning this matter t		
	Erik Treutlein		
	1.00	Name of Person	
	Legalzoom.com, Inc.		
	·	Firm/Company	
	9900 Spectrum Dr		
		Address	
	Austin, TX 78717		
	cubbymcmenamy@gmail.cc	City/State and Zip Code	
		o be used for future annual report notif	ication)
For further information of	oncerning this matter, please ca	II:	
Erik Treutlein		800 773-0888	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Ta:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nova Home Pros LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L25000016174</u>	were filed on01/08/202	5 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 Liabil	lity Company," the designatio	n "LLC" or the abbreviation "L.1C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter now mailing address if applicables		22
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
Making address MAI BE A POST OFFICE BOX		1
		<u></u>
B. If amending the registered agent and/or registered of		ecords, enter the name of the ne
registered agent and/or the new registered office address here	<u>e</u> :	• • • • • • • • • • • • • • • • • • •
		(i) (i)
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 or ovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as public filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dute provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
/S/		

If Changing Registered Agent, Signature of New Registered Agent

To: Page: 5 of 6

2025-02-20 08:46:50 PST

LegalZoom.com, Inc.

From: Anendprakesh Rajbhar

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>	<u>Address</u>	Type of Action
AMBR	Francesco Anthony Messina	150 Wisteria Dr. Longwood, FL 32779.	<b>⊟</b> Add
			Remove
			☐ Change
			🗖 Add
			☐ Remove
			Change
			🗆 Add
			Remove
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			□ Remove
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			Add
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			Change
	<del> </del>		🗆 Add
			□ Remove
			☐ Change

	• •	<del></del>	2025-02-20 08:46:50 PST	LegalZoom.com, Inc.	From: Anandprakash Re
D.	If amendin	g any other in	formation, enter change(s) here: (A)	tach additional sheets, if necessary.)	
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•	Ecc + 1		AL J.A. FEU.	(notional)	
E.	If an effective da	ite, ir otner the date is listed, the c	an the date of filing:	of filing or more than 90 days after filing.) Put	rsuant to 605.0207 (3)(b)
	Note: If the	date inserted in	this block does not meet the applicable st	atutory filing requirements, this date will	not be listed as the
	document's	effective date or	n the Department of State's records.		
		specifies a de	elayed effective date, but not an	effective time, at 12:01 a.m. on	the earlier of:
			sa saacad ia Claul		
			ne record is filed.		
(b)	The 90th	day after th			
(b)	The 90th	day after th	ne record is filed		
(b)	The 90th  Dated 02/20	day after th	. 2025		
(b)	The 90th  Dated 02/20	day after th		enesentative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00