

LI 00000 7504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

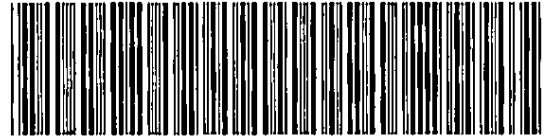
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600321265206

12/04/18--01018--024 **80.00

FILED
2018 DEC -4 PM 5:25
TALLAHASSEE, FL
STATE

C. GOLDEN

DEC - 6 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1050 Commercial Architectural Woodworking, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Carbaugh
Name of Person
1050 Commercial Architectural Woodworking, LLC
Firm/Company
1050 NW 1st Ave, Ste 16
Address
Boca Raton, FL 33432
City/State and Zip Code
Admin@1050caw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Carbaugh at (561) 391-3103
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- 25.00 Filing Fee
330.00 Filing Fee & Certificate of Status
555.00 Filing Fee & Certified Copy (additional copy is enclosed)
660.00 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2018 DEC -4 PM 5: 25

1050 Commercial Architectural Woodworking, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

STATE OF FLORIDA
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 01/18/2011 and assigned
Florida document number L11000007504.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1050 NW 1st Ave

(Principal office address MUST BE A STREET ADDRESS)

Ste 16

Boca Raton, FL 33432

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Lisa Carbaugh

New Registered Office Address:

1050 NW 1st Ave, Ste 16

Enter Florida street address

Boca Raton

Florida 33432

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Timothy R Lewis	3600 NW Boca Raton Blvd	<input type="checkbox"/> Add
		Boca Raton, FL 33431	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Mark T Noell	1050 NW 1st Ave	<input checked="" type="checkbox"/> Add
		Ste 16	<input type="checkbox"/> Remove
		Boca Raton, FL 33432	<input type="checkbox"/> Change
AMBR	Lisa Carbaugh	1050 NW 1st Ave	<input checked="" type="checkbox"/> Add
		Ste 16	<input type="checkbox"/> Remove
		Boca Raton, FL 33432	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated November 30 2018



Signature of a member or authorized representative of a member

Lisa Carbaugh

Typed or printed name of signee