# L000007153

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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NOV 13 2015

S. YOUNG

#### **COVER LETTER**

	ration Section of Corpor				
	LEMAN & S	SONS CUSTOM WOODW	ORKS, LLC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed A	rticles of Am	nendment and fee(s) are sub	mitted for filing.		
Please return all	l corresponde	ence concerning this matter	to the following:		
		JON F. GLEMAN			SECRE F
			Name of Person		
		GLEMAN & SONS CUST	TOM WOODWORKS, LLC		W 12 M 3 09
			Firm/Company		三三二三
		110 Tech Drive			8
	Address				-
		Sanford, Florida 32771			
			City/State and Zip Code		-
	<u>:</u>	jgleman@glemanandsons.c			
		E-mail address: (	to be used for future annual re	port notification)	
For further info	rmation cond	erning this matter, please ca	all:		
JON F. GLEMA			407- 864- at ()		· · · · · ·
	Name of Pe	erson	Area Code	Daytime Telephone Numbe	r
Enclosed is a ch	neck for the f	ollowing amount:			
□ \$25.00 Filin	ng Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	ate of Status &

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

GLEMAN & SONS CUSTOM WOODWORKS	, LLC	
( <u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appears on our record- nited Liability Company)	s <u>.</u> )
The Articles of Organization for this Limited Liability Com Florida document number L06000007453	pany were filed on January 23, 2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company "the designation "LLC	or the obtaclibition "LLC"
the new harne thust be distinguishable and contain the words. Extinted	Liaomy Company, the designation LLC	or the aboreyiation L.L.C.
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u></u>	82 N M
Enter new mailing address, if applicable:	110 Tech Drive	3.09 10,000 10,0
Mailing address MAY BE A POST OFFICE BOX)	Sanford, Florida 32771	
s. If amending the registered agent and/or registere egistered agent and/or the new registered office address		, enter the name of the
Name of New Registered Agent:	- · · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	, Flo	orida 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>	Address	Type of Action
MGR	JON F. GLEMAN	110 Tech Drive, Sanford, Florida 3	
			□ Remove
		<del></del>	Change
MGR	ADRIAN GLEMAN	110 Tech Drive, Sanford, Florida 3	Add
			□ Remove
			■ Change
	***		7 SEOPE TO
			Rêmove T
			Change
<del></del>			RD Add
			Remove
			Change
			Remove
			□ Change
			Remove
			Change

Effective date, if other than the date of filing:  ((Fan 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 605,9207  Note: If the date inserted in his block does not neet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 1 The 90th day after the record is filed.  Dated November 2  2815  Signature of a member or authorized representative of a member	If amending any other information, ente	a change(s) here.	inderi dadilioridi Briccis, i	g necessary.)
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Dated November 2 2015	(If an effective date is listed, the date must be specific Note: If the date inserted in this block does n	c and cannot be prior to do not meet the applicable	ate of filing or more than 90 day	(optional)
Dated			n effective time, at 12	:01 a.m. on the earlier of:
Signature of a member or authorized representative of a member	Dated November 2	2015		
Signature of a member or authorized representative of a member		en e		
	Signature of	of a member or authorize	d representative of a member	
JON F. GLEMAN	JON F. GLEMAN			

Page 3 of 3

Filing Fee: \$25.00