

L060000051609

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(Address)

(City/State/Zip/Phone #)

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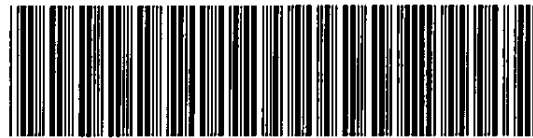
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J. BRYAN JUL - 7 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kuzava Door and Trim 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:

Bryan Kuzava

(Name of Person)

Kuzava Door and Trim LLC.

(Firm/Company)

151 Autumn Ct.

(Address)

Saint Cloud, FL 34771

(City/State and Zip Code)

For further information concerning this matter, please call:

Bryan Kuzava

(Name of Person)

at (810) 820-5456

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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

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

Kuzava Door and Trim LLC.

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 5/18/06 and assigned document number LO6000051609.

SECOND: This amendment is submitted to amend the following:

I need to be added as a manager of my company in
order to be given my workers' compensation exemption.

Manager/Member Detail

Bryan Kuzava Title: Manager

151 Autumn Ct.

St. cloud, FL 34771

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Dated June 30, 2006.


Signature of a member or authorized representative of a member

Bryan Kuzava
Typed or printed name of signee

Filing Fee: \$25.00