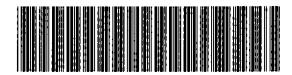
## L06000100515

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## **COVER LETTER**

Division of Corporations	
SUBJECT: Apollo Windows & Doors, LLC	•
(Name of Limited Liability Company)	
THE SECOND	<u>\</u>
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
SUBJECT: Apollo Windows & Doors, 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:  Apollo Windows & Doors, LLC  (Name of Person)	1
Apollo Windows & Doors, LLC	٥
(Name of Person)	
(Firm/Company)	
5 Lane Drive Unit E (Address)	
Mary Esther, FL 32569	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Elizabeth Ricci, Esq. at (850 ) 224 4529	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Solon Filing Fee & Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
MAILING ADDRESS: STREET/COURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Apollo Windows & Doors, LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Florida document number <u>L06000100515</u>	ity Company were filed on <u>2/28/2000</u>	and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	designation "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, <u>enter the name of the new</u>	
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's Signature, if changing Registered agenthe provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registered company has been notified in writing of this change.	gent and agree to act in this capacity er and complete performance of my a ed agent as provided for in Chapter ( stered office address, I hereby confir	luties, and I am familiar with and 508, F.S. Or, if this document is	

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Address Type of Action** Name **Title** 5 Lane Drive Unit E MGR\_ Rudi Schmeer Add Mary Esther, FL 32569 ✓ Remove Absolute Storm Protection 5 Lane Drive Unit E Mary Esther, FL 35269 MGR ✓ Add ☐ Remove Add Remove □Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated February 25 Signature of a member or authorized representative of a member

Page 2 of 2

Rudi Schmeer
Typed or printed name of signee

Filing Fee: \$25.00