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SECRETARY OF STATE

S. HAWKES

MAY 1 4 2009

EXAMINER

S. HAWKES

APR = 9 70.9

EXAMINER



April 9, 2009

CLAYTON R SLAPPEY 4806 CAINS WREN TRAIL SANFORD, FL 32771

SUBJECT: ATLANTIS DOOR & SHUTTER, LLC

Ref. Number: L07000034977

We have received your document for ATLANTIS DOOR & SHUTTER, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 309A00012019

Suzanne Hawkes Regulatory Specialist II

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Atlantis	Door AND Shutter, LLC
DOCUMENT NUMBER: L 070000	034977
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Clayton R. SI	Appey Contact Person)
Atlantis Door A	ND ShuHer, LLC Company)
4806 CAINS WRE	N TRAIL
SANFORD, FLOR	CIDA 32771 c and Zip Code)
For further information concerning this matter, ple	
Clayton R. Slappey (Name of Contact Person)	at (
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Atlantis DOOR AND Shu HER, LLC				
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
(A Florida Limited Liaonity Company)				

(*********		,	,		•
The Articles of Organization for this Limited Liabilit		e filed on _	04/03/	2007	_ and assigned
Florida document number <u>L07000034</u>	1977			老	3 -1
This amendment is submitted to amend the following	<u>y</u> :				
A. If amending name, enter the new name of the	limited liability	company l	<u>iere</u> :		图 是 色
The new name must be distinguishable and end with the "L.L.C."					# F
Enter new principal offices address, if applicable:	<u> </u>	4806	CAINS	WREN 3277	TRAIL
(Principal office address MUST BE A STREET AL	ODRESS)	SANFO	DED, FL	_ 3277	<u>'1</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	480G Sanfo	CAINS RD, FL	WREN 7 . 32771	TRAIL
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:		address o	n our recor	ds, enter the	name of the nev
	4806 C. Sanfori	AINS	WREN	TRAIL	
THE TREGISTER OF THE TRUST SEE		- , · · -	(Enter Florid	da street addre	ss)
	SANFORD	>		Florida 3	32771
		City)	,		(Zip Code)
Nine Deviational Assertic Cine Assertic Desire	tound Amouts				

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 608, 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 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 = M MGRM =	anager Managing Member		
Title.	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			TALLE SECTION
			Remove
			97
			Add
			Add Remove
	•		-
			Add Remove
D. If ame	nding any other information	, enter change(s) here: (Attach additional sheet	ts, if necessary.)
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-	Ano 1 -13		· · · · · · · · · · · · · · · · · · ·
Dated	April 23	-1/ (/.	
	Signati	ire of a member of authorized representative of a mer	mber
	Clayt	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00