Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110001079903)))



H110001079903ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HAILE, SHAW & PFAFFENBERGER, F.A.

Account Number : 076326003550 Phone : (561)627-8100 Fax Number : (561)622-7603

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: <u>glenco 4 Systms @aol.com</u>

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WIND-O-SHIELD, LLC

RECEIVED 11 MAY - 3 PM 1: 10 SECRETARY OF STATE

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

FILED

11 MAY -3 AM 8: 16

SECRETARY OF STATE
AND AMASSEF, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

 $_{ ext{ iny Help}}$  J. BRYAN

MAY -4 2011



FAN: #11-107990

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF WIND-O-SHIELD, LLC

Pursuant to the provisions of Section 608.411 of the Florida Limited Liability Company Act, WIND-O-SHIELD, LLC adopts the following Articles of Amendment to its Articles of Organization:

FIRST:

The name of the limited liability company is WIND-O-SHIELD, LLC (the

"Company").

SECOND:

The Articles of Organization of the Company were filed with the Florida

Department of State on May 3, 2007, under Document Number

L07000047289.

THIRD:

The following amendment to the Articles of Organization was adopted by

the Company:

Article I of the Articles of Organization is hereby amended and restated in

its entirety to read as follows:

## ARTICLE I - NAME

The name of this limited liability company is SOUTH FLORIDA PLASTICS, LLC (the "Company").

Dated this 19 day of April, 2011.

WIND-O-SHIPPD, LLC

Ralph Glendinning, Manager

H-11-107990

TIMAY -3 AM 8: 16
SECRETARY OF STATE

FAN: