

L07000123230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

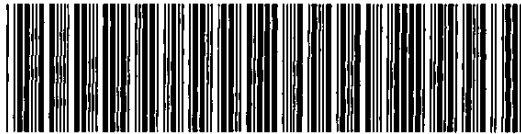
(Business Entity Name)

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DIVISION OF CORPORATIONS
08 FEB 12 PM 2:05

J. BRYAN
FEB 13 2008
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Access Glass & Construction 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:

John H. Dobrilla
(Name of Person)

Access Glass & Const
(Firm/Company)

8867 NW. 139 Terrace
(Address)

Miami Lakes, Fl. 33018
(City/State and Zip Code)

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For further information concerning this matter, please call:

John / Arasel at 786 301 1856 / 786 2915949
(Name of Person) (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

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

Title	Name	Address	Type of Action
MGR	Aracel Dobrilla	8867 M.W. 139 Terr MIAMI LKS, FL. 33018	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

(ARTICLE III) to be changed ...
 The purpose for which this Limited Liability Company is :

ANY LAWFUL PURPOSE

Dated February 6, 2008.

John Dobrilla

Signature of a member or authorized representative of a member

JOHN DOBRILLA

Typed or printed name of signee