

L08000016966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

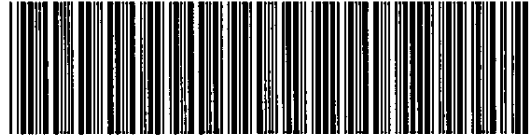
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 JUN 16 P 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 17 2016
J. BRUCE

Enclosed
CK #9011
@ \$25.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B & B Custom Cabinetry, 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:

Charles Navy

Name of Person

B & B Custom Cabinetry, LLC

Firm/Company

12141 Crystal Condo Rd

Address

Ft. Myers, FL 33966

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Navy

239

275-6551

at ()
Area Code

Daytime Telephone Number

Name of Person

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B & B Custom Cabinetry, 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 Company were filed on 2/15/08 and assigned Florida document number L08000016966.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Enava Woodworks, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3842 Ironbridge Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Fort Myers, FL 33916

Enter new mailing address, if applicable:

3842 Ironbridge Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Fort Myers, FL 33916

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

3842 Ironbridge Blvd.

Enter Florida street address

Fort Myers

Florida 33916

City

Zip Code

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 605, 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
		3842 Ironbridge Blvd.	<input type="checkbox"/> Add
		Fort Myers, FL 33916	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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