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COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: Mades Mirrors, Glass & Storefronts, UC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Irene Fronimakis (Name of Person)
Naples Mirrors Glass & Store Fronts UC (Firm/Company)
1370 Pail Head Blud #8-9
City/State and Zip Code)
For further information concerning this matter, please call:
Tren Frankis at (239) 384-0928 (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 Certified Copy (additional copy is enclosed) \$25.00 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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

A Florida Limited Liability Company)

FILED

08 SEP 29 AM 8: 29

SECRETARY OF STATE TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on Section 15, 2008 and assigned Florida document number <u>L 0800087824</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 1320 Rail Head Blud + 80 (Principal office address MUST BE A STREET ADDRESS) Japles, FL 3411 Enter new mailing address, if applicable: 1320 Rail Head Blint#8-9 (Mailing address MAY BE A POST OFFICE BOX) 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: Erik Franimak

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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 nd accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is 5 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.

(HChanging Registered Agent, Signature of New Registered Agent)

(Enter Florida street address)

Page 1 of 2

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** <u>Name</u> Address **Type of Action** MEGR ETIL Frankis ☐ Remove ■ Add Remove **☐** Add Remove Remove Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member -ronimaki& Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00