L11000031969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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LLC N/C Amend

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY

OCT 14 2024

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: RENOVATION IN A BOX, 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:

C. NICK ASMA
Name of Person

ASMA & ASMA, P.A.
Firm/Company

884 S. DILLARD STREET
Address

WINTER GARDEN, FL 34787
City/State and Zip Code

nick.asma@asmapa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy at (407) 656-5750
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF ORANGE

The undersigned, being first duly sworn, deposes and says on oath as follows:

1. She is the Manager of Prestige Iron Doors, LLC document number L13000057909 filed on April 19, 2013.

2. She has filed Articles of Dissolution in accordance with Florida Statute 607.0123 and a copy of said Articles of Dissolution is attached hereto.

3. She does not intend to revoke the Articles of Dissolution and hereby waives the 120 day revocation period provided by Florida Statute 607.1404.

IN WITNESS whereof, the undersigned has hereto set her hand and seal this 25th day of September, 2024.

Signed, sealed and delivered
In the presence of:

Witness: Elizabeth Millan

JUSTINE L. MACIEL, Manager

Witness: Kathy Ann Dickey

The foregoing instrument was acknowledged before me by means of ☑ physical presence or ☐ online notarization this 25th day of September, 2024, by Justine L. Maciel, who is personally known to me or produced _____ as identification.

Notary Public State of Florida
Kathy Ann Dickey
My Commission HH 472803
Expires 12/18/2027

Notary Public
My Commission expires:

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2024 OCT 21 PM 12 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RENOVATION IN A BOX, 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 March 23, 2010 and assigned Florida document number L10000031969.

This amendment is submitted to amend the following:

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

PRESTIGE IRON DOORS, 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, **Florida** *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

Title	Name	Address	Type of Action
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 25 : 2024 .

Signature of a member or authorized representative of a member

Justine L. Maciel

Typed or printed name of signee

Filing Fee: $25.00