

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ALL GLASS & MIRROR LLC**

Certificate of Status	0
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A. LUNT

NOV 18 2011

**EXAMINER** 

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Corporate Filing Menu

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## **COVER LETTER**

Division of Co						
SUBJECT: ALL GL	ASS & MIRROR LLC					
	(Name of Lim	ited Liability Company)				
	FAmendment and fee(s) are sub ondence concerning this matter	-				
	Barbara Dang					
		(Name of Person)				
	Legalzoom.com, Inc					
		(Firm/Company)		<b>A</b> cci	201	
	100 W. Broadway St	uite 100		L'AR BRO	2011 NOV 1	
		(Address)		AS	<b>V</b>	- 14) - 142
	Glendale, CA 91210			SEE.	7	1
		(City/State and Zip Code)				
For further information	concerning this matter, please of	all:			ان ال	
Barbara Dang		at (323 ) 962-8600				
(Name	of Person)	(Area Code & Daytime	Telephone Number	r)		
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)	Certified	e of Status		I)

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 TO ARTICLES OF ORGANIZATION OF

ALL GLASS & MIRROR LLC	•		
Name of the Limited Lin	ability Company as it now appears on our records orida Limited Liability Company)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(A FII	orida Cimiled Liability Company)	产品 里	
The Articles of Organization for this Limited Liabi	ility Company were filed on 03/02/2011	And Sign	ied T
Florida document number <u>L11000025805</u>		<b>5 1</b>	Aur 3
	<del></del>	7 SSI	
m		me <b>₹</b>	
This amendment is submitted to amend the following	ng:		in G
		95	-
A. If amending name, enter the new name of th	e limited liability company here:	ORIDI	
		15	
The new name must be distinguishable and end with th	ne words "Limited Liability Company," the designation	on "LLC" or the abbi	reviation
Name of New Registered Agent:  New Registered Office Address:	(Enter Florida stre	at adduces)	
	(Ester Florida Sire	n Lauress)	
<u></u>	, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered at the provisions of all statutes relative to the prop accept the obligations of my position as register heing filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete performance of my duties, ar red agent as provided for in Chapter 608, F.S. istered office address, I hereby confirm that th	nd I am familiar wi Or, if this docume	th and
	(If Chapping Registered Agent, Signature of N	ew Revistered Apent)	_

if amendor Mana	ding the Managers o aging Member being	r Managing Men added or remove	nbers on our records, enter the title, named from our records:	e, and address of each Manager
MGR ≈ MGRM	Manager = Managing Membe	<b>r</b>		
<u>Title</u>	Name		Address	Type of Action
MGRM	. Amanda Tro	eni	4100 North Powerline Rd. Sc Pompano Beach, Florida 330	uite P-3
	<del></del>			Add Remove
<u>موسودة والمتوسوسة .</u>	-			Add Remove
				Add Remove
		<del></del> -		AAL ROBOVE
	-	<del></del>		S R Add
D. Ifam	ending any other info	ormation, enter c	thange(s) here: (Attach additional sheets, if	necessary ;
Dated	November	6 . 3	2011	
	Paul Kuenzle		yped or printed name of signee	

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Filing Fee: \$25.00