L11000027788

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SECRETARY OF STATE
ASSECRETARY OF STATE

JUN 2 4 2013 J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

First Avenue Glass, LLC

Name of Limited Liability Company

EIN: 46-2982937

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Hartley

Name of Person

Firm/Company

PO Box 76015

Address

St. Petersburg, FL 33734

City/State and Zip Code

brianchartley@gmail.com

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

For further information concerning this matter, please call:

Brian Hartley

₃₁,727 \5251000

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

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

ADTI) I 'O TO 2T IO	RGANIZATION	ـ فـ
, ANTI	CLES OF O		ur records.) and assigned.
		•	
First Avenue Glass, LLC			1 5 Th
(Name of the Limited	Liability Compar	iy as it now appears on o iability Company)	ur records.)
(A	Florida Limited L	admity Company)	
The Articles of Organization for this Limited Li	ability Company	were filed on 3/01/20	011 and assigned &
Florida document number L11000027788			The state of the s
			,
This amendment is submitted to amend the follo	wing:		
	_		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 17.1.1111 0	
The new name must be distinguishable and end with "L.L.C."	n the words "Limit	ted Liability Company," ti	ne designation "LLC" or the abbreviation
Enter now principal offices address if applica	, blos	4200 4th St. N	#3
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		St. Petersburg,	
Trincipul office duaress MOST BE A STREE	I ADDKESS)	Ot. 1 Otoloburg,	1 2 007 00
7		PO Box 76015	
Enter new mailing address, if applicable:			EL 22724
(Mailing address MAY BE A POST OFFICE)	BOX)	St. Petersburg,	FL 33734
			1 - 100 to 41
B. If amending the registered agent and/o	on manistered of	Gas adduses on sum m	and and the same of the same
registered agent and/or the new registered of			ecords, enter the name of the new
-		-	
Name of New Registered Agent:	Brian Hart	ley	
New Registered Office Address:	4200 4th S	St. N	
New Registered Office Address:			orida street address
	St. Peters	bura	, Florida 33703
	2 0.010	City	Zip Code
Now Designated Agentla Signature if the	lagistanad Agente	•	•

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 608, 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 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
MGRM	Jospeh Silvernail	11975 7th St E	Add
		Treasure Island, FL 33706	Remove
VP_	Gloria Silvernail	11975 7th St E	Add
		Treasure Island, FL 33706	Remove
MGR	Brian Hartley	4200 4th St. N #3	Add
		St. Petersburg, FL 33703	Remove
		TALLAHAS	Add Refrove
		SEL	PR : PAdd
			Remove
			Add
		·	Remove

If amending any other	er information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
,	,
_{ed} 6/12/2013	3
eq O O O O O O O O O O O O O O O O O O O	,
	Signature of a member or authorized representative of a member
Brian Ha	irtley
	Typed or printed name of signee

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Filing Fee: \$25.00

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