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08/08/14--01013--010 **25.00

COVER LETTER :

TO:	Registration Sec Division of Corp		4				
SUBJEC	Sign Fact	Sign Factory Supply, LLC					
SUBJEC	-1 ·	Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please re	turn all correspon	ndence concerning this matter	to the following:				
		Kevin Borodunovich	1				
			Name of Person	 			
	Sign Factory Supply, LLC						
Firm/Company 2309 Hancock Bridge Pkwy							
					Address		
		Cape Coral, FL 339	90				
		City/State and Zip Code					
		kevin@signfactorysu	• • •				
			to be used for future annual report notifi	cation)			
For furth	er information co	oncerning this matter, please c	all:				
Kevin I	Borodunovich	า	239 362-5838 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed	is a check for the	e following amount:					
□ \$25.0	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

any as it now appears on our records.) Liability Company)	
were filed on 7/13/2011	and assigned
oility company here:	
bility Company," the designation "LLC" o	r the abbreviation "L.L.C."
160 Hunter Blvd.	<u>;</u>
Unit B3	
Cape Coral, FL 33990	
	<u> </u>
	, s. s.
ffice address on our records, e	•
<u>e</u> :	
Enter Plant de stant de 1	
, Florid	aZip Code
	bility company here: bility Company," the designation "LLC" of 160 Hunter Blvd. Unit B3 Cape Coral, FL 33990 ffice address on our records, energy the street address on the

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action		
AMBR	Dylan Doyle	1925 Clifford Street	■ Add		
		Apt. 14	Remove		
		Fort Myers, FL 33901			
		· - · · · · · · · · · · · · · · · · · ·	□ Add		
			□ Remove		
					
			☐ Remove		
			Remove		
			Add		
		 	Remove		
			□ Add		
			☐ Remove		

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. E	Effective date, if other than the date of filing:
	Dated August 5th 2014
	New By By By Signature of a member or authorized representative of a member
	Kevin Borodunovich
	Typed or printed name of signee

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Filing Fee: \$25.00