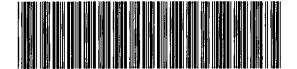
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T. HAMPTON

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	B&R SERVICES V	VINDOWS, DOORS LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
		Bobby W Brown	
		Name of Person	
		Firm/Company	
	79	1 DELANO AVENUE	· .
		Address	
	F	PALM BAY FL 32907	
		City/State and Zip Code	
	E-mail address: (t	o be used for future annual report notificat	ion)
For further information	on concerning this matter, please c	all:	
E	Bobby W Brown	at (_ +)	61-8349
Nan	ne of Person	Area Code & Daytime T	elephone Number
Enclosed is a check for	or 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:

TO:

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

B&R SERVICES WINDOWS, DOORS 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 fi	led on4/10/12	and assigned	
Florida document numberL1	2000048696		,	
This amendment is submitted to amen	nd the following:			
A. If amending name, enter the ne	w name of the limited liability cor	npany here:		
The new name must be distinguishable a "L.L.C."	and end with the words "Limited Liab	ility Company," the designation	n "LLC" or the abbreviation	
Enter new principal offices address	, if applicable:		3 5 7 7	
(Principal office address MUST BE	A CTREET ADDRECC		,	
Enter new mailing address, if appli-	cable:			
(Mailing address MAY BE A POST	OFFICE BOX)			
	 _			
B. If amending the registered ag registered agent and/or the new reg	ent and/or registered office add istered office address here:	lress on our records, <u>ente</u>	r the name of the new	
Name of New Registered Ag	rent:		9 se	
New Registered Office Addr	bee.			
- Trogistered Office Field		Enter Florida street address		
		, Florida		
•	Citv		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 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 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> Type of Action **Address** MGR BROWN, ROSE M 791 DELANO AVENUE ☐ Add PALM BAY FL 32907 Remove MGRMBROWN, BOBBY W 🗹 Add 791 DELANO AVENUE PALM BAY FL 32907 Remove ☐ Add Remove Add Remove □Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 4-16-2012 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00