L12000113637

-	(Requestor's Name)				
 	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UF	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



100248524501

08/12/13--01001--010 **60.00

2013 AUG -8 PH 3: 29
SECRETARY OF STATE

AUG - 9 2013 T CLINE



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2013

THOMAS J. PRZYBYLSKI JR 12124 TEMPLE BLVD WEST PALM BEACH, FL 33412

SUBJECT: TOM'S GLASS WORKS, LLC

Ref. Number: L12000113637

We have received your document for TOM'S GLASS WORKS, LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$60.00.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please হোঁ। (৪50) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 513A00014364

COVER LETTER

TO: Registration Section
Division of Corporations

_{r.} Tom's Glass Works 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:

Thomas J. Przybylski Jr

Name of Person

Tom's Glass Works LLC

Firm/Company

12124 Temple Blvd

Address

West Palm Beach, FL. 33412

City/State and Zip Code

tom@tomsglassworks.com

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

For further information concerning this matter, please call:

Thomas J. Przybylski Jr.

561 301-8684

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

Tom's Glass Works LLC	Liability Company as it nov Florida Limited Liability Co	w appears on our records	<u>s.</u>)
The Articles of Organization for this Limited Li Florida document number L12000113637	ability Company were filed		and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liability comp	oany here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liabilit	y Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applica	able:		2013 SEC
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:			SANTOF ST
(Mailing address MAY BE A POST OFFICE	BOX)		29
B. If amending the registered agent and/or the new registered of		ess on our records, <u>er</u>	nter the name of the new
Name of New Registered Agent:	Thomas J. Przyb	ylski Jr.	
New Registered Office Address:	12124 Temple Bl		
		Enter Florida stree	
	West Palm Beach	n, Florid	_{la} 33412
	City		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 dities, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.f.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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Thomas J Przybylski Jr		
			Remove
			
			Add
			Remove
		A SECTION AND SECT	
		्रि जिल्ला च	Add Add Remove
		(1) (1) (2)	29
			Add
		.	Remove
			-
<u> </u>			_ Add
			Remove
			-
			Add
			Remove

T. 0 2/17)
T. 0.2/17	
T. 0.2/17	
T. 0.2/12	
T. 0 2/12	
pated June 1, 2019	
Mu (Perly)	
Signature of a member of authorized representative of a member	
Thomas J Przybylski Jr	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

2013 AUG -8 PM 3: 2