Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARC L. SHAPIRO, P.A.

Account Number: 120080000007 Phone : (239)649-8050

Fax Number : (239)649-8054

*Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please ...

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NAPLES SCREEN REPAIR, LLC

Certificate of Status	. 0
Certified Copy	. 0
Page Count	04
Estimated Charge	\$25.00

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239-649-8057

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COVER LETTER

	sion of Cor			
		CREEN REPAIR, LLC		
subject:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Hafida Elkadiri		
		· · · ·	Name of Person	
		Marc L. Shapiro, PA		
			Firm/Company	
		720 Goodlette Rd N. # 304	;	
			Address	
		Naples, FL 34102		
		hafida@attorneyshapiro.com		
D 6	6		to be used for future annual report notif	cation)
ror turtner in: Hafida Elkad		oncerning this matter, please or		
	Name of	f Person	239 649-8050 at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25. 00 Fi	ling 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 12-10-'15 04:02 FROM-MARC SHAPARIO, PA

239-649-8057

T-371 P003/005 F-488

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAPLES SCREEN REPAIR, LLC	7.1.0171				
(Name of the Limited L	fability Company as it now appears an our records Florida Limited Liability Company)	<u>r.</u>			
The Articles of Organization for this Limited Liabi Florida document number L13000044431	lity Company were filed on 03/25/2013	and assigned			
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the limited liability company here:					
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	DDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>xy</u>	15 E			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records	35 m) 27 mm			
Name of New Registered Agent:	,,,,	9: 5 8: 59			
New Registered Office Address:	Enter Florida street address				
	Pla	rida			
-	City , F 10	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 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

12-10-'15 04:02 FROM-MARC SHAPARIO, PA

239-649-8057

T-371 P004/005 F-488

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	CUNNINGHAM DAVID L.	2193 GROVE DR.	
		NAPLES, FL 34120	Remove
			Change
			Add
			□ Remove
			Change
	,		D Add
			□ Remove
			Change 55 Change 75 Remove
			Change Change
			☐ Remove
			Change
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	,		Change

Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. The 90th day after the record is filed. Dated							···		<u></u>		-
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Filing Fee: \$25.00