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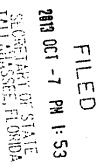
•		
(Re	equestor's Name)	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Namo	е)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		!

Office Use Only



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10/07/13--01025--003 **30.00



COVER LETTER

SUBJECT:		EZZ LLC ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subt	mitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
		Name of Person REZZ LLC Firm/Company	
	2825 5	Address Lucie/FL 3 City/State and Zip Code Glass Rezz. Com be used for future annual report notification	
		City/State and Zip Code	
	E-mail address: (to	be used for future annual report notification	on)
	cerning this matter, please ca		
Sean G Name of P	Encsy	at (<u>770) 403 - 58 1</u> Area Code & Daytime Te	2 Jephone Number
Enclosed is a check for the \$25.00 Filing Fee	following amount: \$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO: '

Registration Section Division of Corporations

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

FILED
2013 OCT -7 PM 1:53
SECNITARY OF STATE
FLORIDA

Zip Code

	SECRETARY ST PLORIDA
GLASS REZZ LLC (Name of the Limited Liability Company as it now appears on	
(A Florida Limited Liability Company)	rour records.

The Articles of Organization for this Limited Liability Company were filed on MAY 7, 2013 and assigned Florida document number Li30000668]

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	Kim Genesy	2825 SE PERU St.	Add
		Port SAINT Lucie, FL 349	Remove
			Add
			Remove
			Remove
			Add
			Remove
 -			Remove
	·		Add
			Remove

October 5 , 2013.
Signature of a member or authorized representative of a member
SEAN GENCSY Typed or printed name of signee

Filing Fce: \$25.00

FILED PRISTATE SECRETARION