## L13000082899

(Requ	uestor's Name)	
(Addı	ress)	
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(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doci	ument Number)	)
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	egistration S ivision of Co			£	
SHD IE C		REEN & STORM PROTECTI	ON, LLC		
SUBJECT	:	Name of Lin	nited Liability Company	<del></del>	<del></del>
			1		
The enclos	ed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
		ondence concerning this matter	-		
			,		
		Lisa Zahorian			
			Name of Person		-
		TAX & FINANCIAL STR	ATEGISTS LLC		
			Firm/Company		
		28089 VANDERBILT DE	R., SUITE 201		
		<del></del>	Address		<del></del>
		BONITA SPRINGS, FL	34134	<u> </u>	
		<del></del>	City/State and Zip C	ode	
		LISA@WONDERTAX.CO		,	
		E-mail address: (	to be used for future an	nual report notifica	ution)
For further	information	concerning this matter, please c	all:	, 	
LISA ZAH	ORIAN		239 at (	405-8395	
	Name o	of Person	Area Code	Daytime T	elephone Number
n 1 1:					
		he following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing I Certified Copy (additional copy i	y <sup>'</sup> i	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	illing Addres			t Address:	
Registration Section Division of Corporations		_	Registration Section Division of Corporations		
	D. Box 632			Centre of Tall	
Tallahassee, FL 32314		FL 32314	2415 N. Monroe Street, Suite 810		
			Taila	ah <mark>assee, FL 32</mark>	2303



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 21, 2021

LISA ZAHORIAN TAX & FINANCIAL STRATEGISTS LLC 28089 VANDERBILT DR - STE. 201 BONITA SPRINGS, FL 34134

SUBJECT: ABC SCREEN & STORM PROTECTION, LLC

Ref. Number: L13000082899

We have received your document for ABC SCREEN & STORM PROTECTION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P14000083610 - ABC CONSTRUCTION & SERVICE, INC.

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 call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 221A00001391

www.sunbiz.org

Division of Compositions D.O. DOV 6207 Well-bases Florida 2021

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABC SCREEN & STORM PROTECTION, LLC

ADD SOMELIN & STONIN FROTECTION, LLC	<b>-</b>	
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears ted Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Compa	any were filed on 06-0	7-2013 and assigned
Florida document number L13000082899		•
This amendment is submitted to amend the following:	'   . 	
A. If amending name, enter the new name of the limited i		2:
ABC Construction Spec	ial files,	LLC
The new name must be distinguishable and contain the words "Limited L		ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	·	
		3
	11	
Enter new mailing address, if applicable:		· ·
(Mailing address MAY BE A POST OFFICE BOX)		-0
		~
		:: '
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our rec	ords, enter the name of the new registere
Name of New Registered Agent:		
	li	
New Registered Office Address:	Enter Florid	i street address
		FD 4.1
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	ngree to act in this ca ete performance of m us provided for in Ch ice address, I hereby	y duties, and I am familiar with and apter 605, F.S. Or, if this document is confirm that the limited liability
пс	nanging Registered Agen	, Signature of New Registered Agent

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 <u>Title</u> Name. **Address** Type of Action MGR THOMAS WANDERON JR 1374 13TH STREET N, NAPLES FL 34102  $\square$ Add □Remove  $\blacksquare$ Change □Add □Remove □ Change  $\square$ Add □Remove Change □Add □Remove □ Change □Add □Remove □ Change  $\square$ Add  $\square$ Remove

.

□ Change

If amer	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Effectiv	date, if other than the date of filing: (optional)
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
documen	t's effective date on the Department of State's records.
e record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed	· · · · · · · · · · · · · · · · · · ·
N	OVEMBER 30 2029
Dated	
•	Signature of a member or authorized representative of a member
	THOMAS WANDERON JR.
	Typed or printed name of signee

Filing Fee: \$25.00