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SECRETARY OF STATE

NOV 2 1 2013

T. BROWN

COVER LETTER

TO:	Registration Sec Division of Corp	orations		•		i
SUB2	· ECT: <u>*</u>	Mis Flo	riba	Exteriors	LL(2
, , .		Name o	f Limited Liz	bility Company		
The en	closed Articles of A	amendment and fee(s) a	ire submitted	for filing.		
Please	return all correspon	dence concerning this	matter to the	following:		
				Rolly		
				Name of Person		
		Mio	Florio	Extenion Firm/Company	Ś	
•						
		loll	Nan	ey Cia		
		wint	در ځ	Prince Fl State and Zip Code STUNE - PRO	. 32	708
		10	City.	State and Zip Code	ريل د	C 001
		J (LO	less: (to be us	ed for future annual report	o cers	· <u>COINI</u>
For fur	ther information co	ncerning this matter, p	,	od for facult minum repo-	it notification	.,
	Jeff	Rolly		at (Un) 46 Area Code & I	6.808	6
	Name of	Person		Area Code & I	Daytime Tele	phone Number
Enclos	ed is a check for the	e following amount:				
\$25	5.00 Filing Fee	□\$30.00 Filing Fee of Certificate of Sta		\$55.00 Filing Fee & Certified Copy (additional copy is en	closed)	□\$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
MIO Florida Exteriors LLC MIERRY PHY 4:2
(Name of the Limited Liability Company as it now appears on our records)
The Articles of Organization for this Limited Liability Company were filed on September 3, 2013 and assigned Florida document number L 13 000 123739
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 "L.L.C."
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
Enter r toriaa street aaaress

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	mio Carolina Exteriors	41 C Trottee RD	(Add
		41 C Teottra RD WEST Columbia, S.C 29	9169 Remove
			
	•		Add
			Remove
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			Add
			Remove
			
 			Add
			Remove
			
			Add
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	,
i	
	A-41-1
ated	11/14/2013 2013.
	Signature of a member of authorized representative of a member
	(D) Jeff Rolly
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00