

L14000031880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

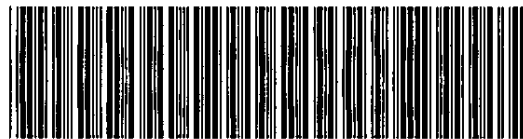
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800264890988

10/16/14--01021--009 **25.00

FILED

2014 OCT 16 P 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

OCT 20 2014

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NEW VIEW WINDOWS AND DOORS 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:

ROBERTO DIBENEDETTO

Name of Person

NEW VIEW WINDOWS AND DOORS LLC

Firm/Company

102 NE 2ND STREET STE 134

Address

BOCA RATON, FL 33432

City/State and Zip Code

INFO@AMERICANEXTERIORCOATINGS.COM

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

For further information concerning this matter, please call:

GREGORY DEVILLE

Name of Person

at **260** **437-6830**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2017 OCT 16 P 3:53
TALLAHASSEE, FL 32301
SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NEW VIEW WINDOWS AND DOORS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03-31-2014 and assigned Florida document number L14000051880.

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:

102 NE 2ND STREET SUITE 134

(Principal office address MUST BE A STREET ADDRESS)

BOCA RATON, FL 33432

Enter new mailing address, if applicable:

102 NE 2ND STREET SUITE 134

(Mailing address MAY BE A POST OFFICE BOX)

BOCA RATON, FL 33432

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:

ROBERTO DIBENEDETTO

New Registered Office Address:

102 NE 2ND STREET SUITE 134

Enter Florida street address

BOCA RATON

, Florida

City

Zip Code

FILED
OCT 16 P 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Roberto DiBenedetto
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>DIBENEDETTO, ROBERTO</u>	<u>102 NE 2ND STREET SUITE 134</u>	<input checked="" type="checkbox"/> Add
		<u>BOCA RATON, FL 33432</u>	<input type="checkbox"/> Remove

MGR BEN ARUSH, ILANA 2610 MARINA BAY DRIVE ☐ Add
FORT LAUDERDALE, FL 33308 ☐ Remove

MGR NORMAN, CHRIS 5771 NE 14TH AVENUE ☐ Add
FORT LAUDERDALE, FL 33334 ☐ Remove

FILED

Id
Remove
Id

2014 OCT 16 P 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

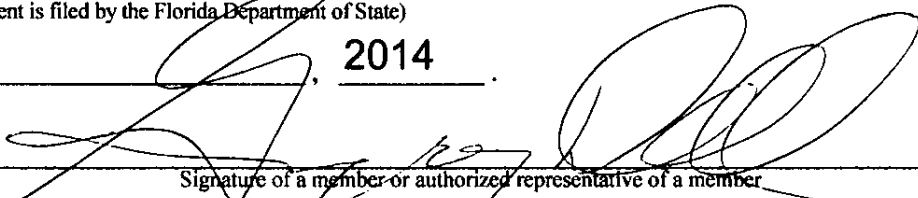
☐ Remove☐ Add☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 10-14, 2014



Signature of a member or authorized representative of a member
GREGORY DEVILLE

Typed or printed name of signee

FILED
2014 OCT 16 P 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA