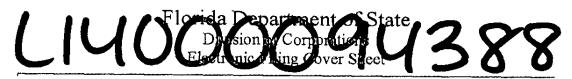
Fax: (813) 932-3782

To: LLC Amendments Fax: +1 (850) 6176383 Division of Corporations Page 2 of 6 09/15/2016 3:55 PM



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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	Division of Co Fax Number	: (850)617-6383	, ,	,
From:			Ξ	7010
	Account Name	: CONTRACTORS REPORTING SERVICES, INC.	AHAS	יר. קר
	Account Number	: 120050000099	(1) A	***
	Phone	: (813)932-5244	က်သ	<u>ر</u>
	Fax Number	: (813)932-3782	11	•
			_1m 	7
**Enter	the email addres	s for this business entity to be used fo	rSfütur	e.c-

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN: SOLAR SHIELD WINDOWS & MORE, LLC

Certificate of Status	0
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To: LLC Amendments

Fax: +1 (860) 6176383

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: SOLAR S	SHIELD WINDOWS &	MORE, LLC	
		ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	ROMAN ALBANO		·
		Name of Person	
	CONTRACTORS RE	PORTING SERVICE INC	
		Firm/Company	
	13795 N NEBRASKA	A AVE	
		Address	
	TAMPA, FL 33613		
		City/State and Zip Code	
	@activatemylicense.d	com o be used for future annual report notif	- continue V
B 0 4 1 0 11		-	ication)
r or further information cor	scerning this matter, please cal	II:	
ROMAN ALBANO		at (813) 932-5244 Area Code Daytime	
Name of I	³ erson	Area Code Daytime	: Telephone Number
Enclosed is a check for the	following amount:		
■ \$25.00 Filing 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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

From: Roman Albano

Fax: (813) 932-3782

To: LLC Amendments

Fax: +1 (850) 6176383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOLAR SHIELD WINDOWS & N (Name of the Limited Liab)	MORE, LLC Ility Company as it now appears on our records.) da Limited Liability Company)		,	-	
(A Florid	da Limited Liability Company)				
The Articles of Organization for this Limited Liability	Company were filed on 11/14/2011		_ and a	assigned	
Florida document number L14000094388	·				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company here:				
STORM TEK WINDOWS & DOORS, LLC.					
The new name must be distinguishable and end with the words "L	imited Liability Company," the designation "LLC"	or the abbr		"L.L.C."	
Dutan ways puincinal offices address if applicables			න ගෙ		. ·
Enter new principal offices address, if applicable:			10	A. a Sabat	
(Principal office address MUST BE A STREET ADD	RESS)			g part with	
		33	نان	*	
		1110	_0 0	1	
		77		وسي	
Enter new mailing address, if applicable:			5.	E. Jack	
(Mailing address MAY BE A POST OFFICE BOX)		_ 콘돔	- 60 -		
		<u>خ</u> ذ			
		•			
D. Te and the the maketaned and and and an area	istanal affice address on our records	onton the	n nam	a of the	0 000
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad-		enter the	e mam	e or the	e nev
registered agent and/of the new registered office ad-	uress nere.				
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address	· 	 -		
	Emer Pioridu sireet uud ess				
	, Flori	ida			
	City		Zip Cod	te	

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

rom: Roman Albano If amending <u>Authorized</u>]		er on our records, enter the title, na	Page 5 of 8 09/15/2018 3:55 PM ume, and address of each Manager or
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			———□ Remove
		•	□ Remove
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			Remove
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. If amend	ing any other informati	on, enter change(s) bere	:: (Attach additional sh	eets, if necessary.)
			,	

Effective	date, if other than the d	ate of filing:		(optional)
The effective the date th	re date must be specific, cannot is document is filed by the Flor	he prior to date of receipt or fi ida Department of State)	led date and cannot be more t	than 90 days after
01	EDTEMPED 40	0010		
Dated 5	EPTEMBER 12	<u>2016</u>	<u> </u>	
	Y			
		Ignature of a member of author	rived representative of a me	mbdy
	DAVID E DAMOEV	Carried Control of the Control of th		
	DAVID F RAMSEY	Typed or printe	ed name of signee	

Page 3 of 3

SECRETARY OF SIME