

L14000187222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

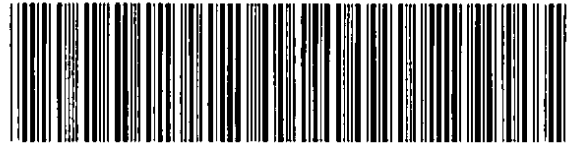
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



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08/28/23--01009--023 ♦♦25.00

2023 AUG 28 PM 12:22  
SECRETARY OF  
TALLAHASSEE, FLORIDA

FILED

W



August 24, 2023

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: LLC Filing – Island Garage Door LLC

To Whom it May Concern:

Please find the following enclosed:

- Check #6002 payable to Florida Department of State in the amount of \$25.00 for LLC Amendment Filing Fee.
- Cover Letter
- Original Articles of Amendment to Articles of Organization of Island Garage Door LLC

If you have any questions, please do not hesitate to contact our office at 239-776-7163.

Sincerely,

A handwritten signature in black ink, appearing to read 'Regen Cona', written in a cursive style.

Regen Cona  
Legal Assistant  
admin@cona.law

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Island Garage Door 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:

Chris CONA  
Name of Person

CONA Law PLLC  
Firm/Company

3765 Airport Road, #201  
Address

Mt. Pleasant, FL 34105  
City/State and Zip Code

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

For further information concerning this matter, please call:

Chris CONA at (279) 234-6822  
Name of Person 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 Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Island Garage Door LLL

(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 12/8/14 and assigned Florida document number L14000187222.

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 contain 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)

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2014 AUG 28 PM 12:22  
TALLAHASSEE, FL 32302  
STATE OF FLORIDA  
CLERK OF THE CIRCUIT COURT

**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*

*City*

*Florida*

*Zip Code*

**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**

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Ambr.	DONALD C. Montroy	14898 Tybee Island Dr	<input type="checkbox"/> Add
		Naples, FL 34119	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Ambr	Donald Montroy Revocable Trust UTD 11/15/22	5146 Kristin Court	<input checked="" type="checkbox"/> Add
		Naples, FL 34105	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

*[This section contains horizontal lines for amendments, which have been crossed out with a large diagonal line.]*

2023 AUG 28 PM 12:22  
SECRETARY OF  
TALLAHASSEE COUNTY

FILED

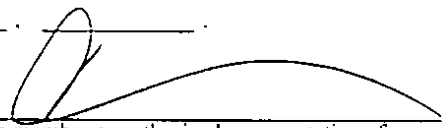
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 record is filed.

Dated 8/23/23

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Chris Lona Esy - PBN-0141178  
\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00