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PICK-UP	☐ WAIT	MAIL MAIL
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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of	f Corpo	rations			
SUBJECT:	LIFETI	ME GARAGE DOORS, LI	_C		
Sobsect.	- <del></del>		ited Liability Company		
The enclosed Article	es of Ar	nendment and fee(s) are sub-	mitted for filing.		•
Please return all cor	теѕропа	ence concerning this matter	to the following:		
		KENNETH R. HOFFI	MAN II		
			Name of Person		
•		LIFETIME GARAGE	DOORS, LLC		
			Firm/Company		
	1331 SAXON DR, STE 5016				小 型沿
Address					すと
		NEW SMYRNA BE	EACH, FL 32169		
			City/State and Zip Code		
		KEN@LTGDFL.C	OM to be used for future annual report notifi		ا المنت المنت
For further informat	tion con	cerning this matter, please ca	•	cation	M 7: 26
KEN HOFFN	/AN		at ( 508 ) 319-1607		
Na	ame of P	erson	Area Code Daytime	Telephone Number	
Enclosed is a check	for the	following amount:			
<b>△</b> \$25.00 Filing Fe	ee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is e	atus &
		G ADDRESS: on Section	STREET/COURING Registration Section		
D		of Corporations	Division of Corpora Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIFETIME GARAGE DOORS, LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on SEPTEMBER 14, 2015	and assigned		
Florida document number <u>L15000155796</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbrev	iation "L.L.C."		
Enter new principal offices address, if applicable:	4067 SAWYER COURT, UNIT #4			
(Principal office address MUST BE A STREET ADDRESS)	SARASOTA, FL 34233			
		-10		
Enter new mailing address, if applicable:	1331 SAXON DR, STE 5016			
(Mailing address MAY BE A POST OFFICE BOX)	NEW SMYRNA BEACH, FL 32169	<u> </u>		
•				
D. If amouding the projectional arount and/on projectional at	25			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		name of the be		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
<del></del>	, Florida	7 in 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>	Name	<u>Address</u>	Type of Action
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			Add
		····	□ Remove
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FEI/EIN	I Number is incor	rrect. The correct	number is 47-8	033182. I've inc	duded the IRS do	cument
for your	review and verif	ication.	, ,			
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	<u>}</u>	Samuel In 1110.	<b>X</b>			
		Signature of a memb	er or authorized r	presentative of a m	ember	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

Date of this notice: 09-11-2015

Employer Identification Number:

47-5033182

Form: SS-4

Number of this notice: CP 575 A

LIFETIME GARAGE DOORS KENNETH ROBERT HOFFMAN II MBR 162 BREEZEWAY CT NEW SMYRNA BEACH, FL 32169

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE,

### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 47-5033182. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941 01/31/2016 Form 940 01/31/2016 Form 1065 04/15/2016

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, Electronic Choices to Pay All Your Federal Taxes. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at www.irs.gov for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, calling 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

### IMPORTANT REMINDERS:

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is LIFE. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

(IRS USE ONLY) 575A 09-11-2015 LIFE B 999999999 SS-4

Keep this part for your records.

CP 575 A (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 A

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 09-11-2015 )

EMPLOYER IDENTIFICATION NUMBER: 47-5033182

FORM: SS-4

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INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 Idolah lalah lalah lalah da lalah la LIFETIME GARAGE DOORS KENNETH ROBERT HOFFMAN II MBR 162 BREEZEWAY CT NEW SMYRNA BEACH, FL 32169