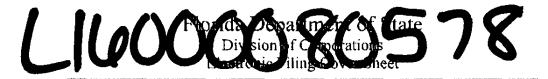
Division of Corporations

12/30/2016 8:10:30 AM PST

13239628300 From: Amanda Sando Page 1 of 2



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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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone Fax Number

: (323) 962-9600 : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

	Address:			
حبطات	AUGIESS.			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GIORGIO'S HOLDING COMPANY, LLC

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12/30/2016

## COVER LETTER .

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то:	Registration Se Division of Cos				
SUBJE	GIORGIC	'S HOLDING COMPANY,	LLC		
		Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.		J
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		CHEYENNE MOSEL	EY		
			Name of Person		
		LEGALZOOM,COM, D	NC.		
			Firm/Company		₫ċ
		101 N BRAND BLVD.,	11TH FLOOR		ű.
			Address		
		GLENDALE, CA 91203	3		
		<u> </u>	City/State and Zip Code		
		Aschossau@gmail.com			
		E-mail address: (	to be used for future annual report notif	(cation)	
For furt	ber information c	oncerning this matter, please of	all;		
CHEY	ENNE MOSEL	.EY	800 773-0888 ex	ct. 9724	
	Name o	of Person		: Telephone Number	
Enclose	d is a check for t	he following amount:			
	.00 Filing Fee	1330.00 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 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

J.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GIORGIO'S HOLDING COMPANY LLC

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Compuny)	
The Articles of Organization for this Limited Liability Company Florida document number L16000080578	were filed on 4/25/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	pility company here:	
FRITZ MARTIN CABINETRY, LLC		
The new name must be distinguishable and end with the words "Limited Lie	bility Company," the designation "LLC" or the	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:	365 5TH AVE. S, SUITE 104	
(Principal office address MUST BE A STREET ADDRESS)	NAPLES, FLORIDA 34102	
		16
Enter new mailing address, if applicable:	365 5TH AVE. S, SUITE 104	7.330
(Mailing address MAY BE A POST OFFICE BOX)	NAPLES, FLORIDA 34102	- 6 A
		♣ isB
,		<b>ာ</b> နိုင္သ
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		the name of the r
Name of New Registered Agent:		
New Resistered Office Address:	France Liberton essent address	
New Resistered Office Address:	Erter Florida street address . Florida	

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 Rogistered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	AARON J SCHOSSAU	3197 EAST PEBBLE CREEK DRIVE	
		AVON PARK, FL 33825	Remove
AMBR	AARON J SCHOSSAU	31104 HANDSOMER DRIVE	
	•	FLAT ROCK, FI. 48134	☐ Remove
AMBR	SANDRA LYNN SCHOSSAU	31104 HANDSOMER DRIVE	Add
		FLAT ROCK, FL 48134	_ □ Remove
			□ ∧dd
		5	□ Remove
			_ Add on _ Remove
			20 ## 05 ST
			Nemove
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. If amending any other information, enter change(1) here: (Attach additional sheets,	, if necessary.)
	, ,
	· · · · · · · · · · · · · · · · · · ·
Effective date, if other than the date of filing:  (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than the date this document is filed by the Florida Department of State)	_ <b>(optional)</b> 90 days after
Effective date, if other than the date of fiting:  (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than the date this document is filed by the Florida Department of State)  Dated 12-27-16,	_ (optional) 90 days after
the date this document is filed by the Florida Department of State)  Dated $12-27-16$ .	90 days after
	90 days after

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