

L16000 103046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

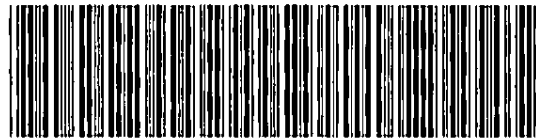
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

1/19/21

Office Use Only



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09/11/20--01007--001 **25.00

FILED
2021 JAN 19 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FL

2/15/21

@



202 OCT 21 10:00

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2020

MATTHEW UEBELACKER
3455 BOBCAT VILLAGE CENTER ROAD
NORTH PORT, FL 34288

SUBJECT: INSTALLATIONS UNLIMITED OF S.W. FLORIDA, LLC
Ref. Number: L16000103046

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

In order to file your documents, the Amendment and the Resignation must be filed separately. The fee to file a Florida Limited Liability Company Amendment is \$25.00 per company. The fee for filing a resignation or dissociation of member or manager from a limited liability company is \$25 per person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 020A00020884

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Installations Unlimited of SW Florida 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:

Matthew Uebelacker

Name of Person

Installations Unlimited of SW Florida LLC

Firm/Company

3455 Bobcat Village Center Road

Address

North Port, FL 34288

City/State and Zip Code

Queenbee@busybeccabinets.com

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

For further information concerning this matter, please call:

Matthew Uebelacker

941 426-5656
at ()

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

FILED

2021 JAN 19 AM 11:40

Installations Unlimited of S.W. Florida, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 05/26/2016 and assigned
Florida document number L16000103046.

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)

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	Russell J Uebelacker		<input type="checkbox"/> Add
		141 Strasburg Drive, Port Charlotte, FL 33954	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Diana Uebelacker	11730 SW Dallas Drive N, Lake Suzy, FL 34269	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00