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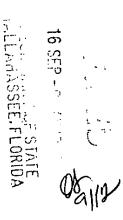
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Sect Division of Corpo			
SUBJE	CT:	Costa Custo. Name of Limit	M Exteriors, LL ted Liability Company	. <u>C</u>
The enc	losed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please r	eturn all correspond	dence concerning this matter t	to the following:	
		Ariel	Name of Person	
			Firm/Company	
		1908	Baltimure Ave Address	.
		Panar	na City, FL 3Z	105
			to be used for future annual report notifi	cation)
For furt	her information cor	ncerning this matter, please ca	all:	
!	Ariel Gara Name of	Person	at (9550) & 25 Area Code Daytime	8447 Telephone Number
Enclose	ed is a check for the	following amount:		
2		□ \$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
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)				
	of Organization for this Limited Liability Company were filed on 8/10/10 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	imited Liability Company were filed on 8/10/14 and assigned DOC 147398 If the following: Iname of the limited liability company here: Intain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." If applicable: ISTREET ADDRESS) The stand of the new stered office address on our records, enter the startile of the new stered office address here: The stand of the new stered office address on our records, enter the startile of the new stered office address here:				
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDR	PESS)				
		सुं सु			
Enter new mailing address, if applicable:		<u> </u>			
(Mailing address MAY BE A POST OFFICE BOX)					
		<u> </u>			
B. If amending the registered agent and/or registered agent and/or the new registered office address		ter the Third of the new			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
-					
	City	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>	Address	Type of Action
MGR	Coreano Vazquez, Jose Ivan	Panama City, FL 32405	
		Panama City, FL 32405	□ Remove
MGR	Ruiz Rodriquez, Jose A	1900 Clay Ave	£S- Add
	Jose A	Panama City, FL 3403240	∑ □ Remove
			Remove
			Change
			□ Add □ Remove
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an effec lote: If	rtive date is li f the date in	ther than the sted, the date me serted in this e date on the	ust be specific block does n	and cannot of the	applicable s	of filing or mo atutory filing	re than 90 days	optional) safter filing.) s, this date v	Pursuant to 6 will not be li	605.0207 isted as
		ies a delay after the re			out not an	effective ti	me, at 12:	01 a.m. d	on the ear	lier of
ated _	Sep	tember	1 ce 1 ve/	\sqrt{c}	16.					
	V		Signature o	of a member	or authorized	epresentative	of a member			
						e of signee				

Page 3 of 3

Filing Fee: \$25.00