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17 JUN 26 AM 10:46
DIVISION OF CORPORATIONS

JUN 29 2017
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Power Blinds Miami 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:

Elio Capote

Name of Person

Power Blinds Miami LLC

Firm/Company

14524 SW 104 CT

Address

Miami Florida 33176

City/State and Zip Code

powerblindsmiami@gmail.com

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

For further information concerning this matter, please call:

Elio Capote

305 783-8283
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Power Blinds Miami LLC

(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 05/15/2017

Florida document number L17000106688

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Power Blinds Miami LLC

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:

14524 SW 104 CT Miami Florida 33176

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

14524 SW 104 CT Miami Florida 33176

(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:

Richard Montes

New Registered Office Address:

14524 SW 104 CT

Enter Florida street address

Miami

City

Florida 33176

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

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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>
MGR	Richard Montes	14524 SW 104 CT Miami FL 33176	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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17 JUN 26
DIVISION OF CORRECTIONS

FILED
17 JUN 25 AM 10:46
DIVISION OF CORPORATIONS

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.

Dated _____, 2019

Signature of a member or authorized representative of a member

Elio Capote

Typed or printed name of signee