L17000214718

(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:





000411668770

07/11/23--01012--011 **25.00

2029 JUL II PH 5: 08
SECRETARY OF STATE
AND SEFF. FLORIDA

T m

14

COVER LETTER

Division of Corp	oorations	•	• •	•
SUBJECT: Shu-	Hers of So	oth Flori	da, 1	LC
	Name of Lim	ited Liability Company	,	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	idence concerning this matter	to the following:		
	Vinc	ent Ar	ersa	
	Shuth	Name of Person	buth f	Torida
	5359 A	Firm/Complete 1. Nob+	11/1 R	
	Sunnise	Address	3335	5)
	+ DNO N E-mail address: (ity/State and Zip Cody Output Output	~ JUN	vo.Com
For further information co	ncerning this matter, please co	all:	100	1.06
/DNIQNI	18 / JONUTZ Person)at (154) Area Code	Daytime Teleph	one 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 enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Sa.,	J.J.,	

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

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

	O	F	_		
Shutters	of Sc	oth t	TORIC	la, LLC	ا ب
(Name of the Limited L (A F	lorida Limited E		١ ١	,	
The Articles of Organization for this Limited Liabil Florida document number <u>L1700021</u> 4		were filed on	0/17/20	and assign	ed
This amendment is submitted to amend the following	<u>ាម</u> ្ភ:				
A. If amending name, enter the new name of the	· limited liabi	lity company he	ere:		
The new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the d	esignation "LLC" o	r the abbreviation "L.L.C	••
Enter new principal offices address, if applicable	::				
(Principal office address MUST BE A STREET A	DDRESS)	1			
				SECONALLY	
87				VETA VETA L J	
Enter new mailing address, if applicable:	1 /2)		<u> </u>	- <u> </u>	_ <u> _</u>
(Mailing address MAY BE A POST OFFICE BQ.	Σ		·	<u> </u>	5
			· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ddress on our r	ecords, <u>enter th</u>	e name of the new re	gistered
Name of New Registered Agent:					
New Registered Office Address:		F . 19			
	Enter Florida street address				
-	·	City	, Flori	da Zip Code	
New Registered Agent's Signature, if changing Regi	stered Agent:				
I hereby accept the appointment as registered approvisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this cha	nd complete ped agent as pessent stered office of the contract	performance of rovided for in C	my duties, and Thapter 605, F.S	I am familiar with a S. Or, if this docume	nd
	If Chan	ging Registered Ag	ent, Signature of N	ew 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 Title Type of Action Aversa Vinant 5359 N. NobHillRd DAdd □ Change ndrew Behm Change □Add □ Remove

☐ Change

	
	ZOZ3
	ECICE LAH
	HASS
	SEC. T
ective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be prior to date of filing or met. If the date inserted in this block does not meet the applicable statutory filing	ore than 90 days after filing.) Pursuant to 605,0207 (. g requirements, this date will not be listed as the
cument's effective date on the Department of State's records.	
ecord 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
s filed.	
red V/4 5 2023. /	
	All so
Signature of a member or authorized representative	of a member

Filing Fee: \$25.00