

# L17000257816

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

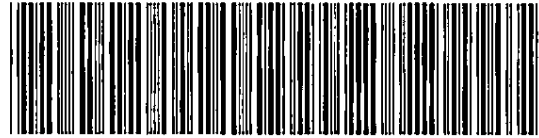
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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NOV 13 2018  
18 NOV 13 PM 2: 26  
CLERK OF SUPERIOR COURT  
STATE OF NEW YORK

DEC 04 2018

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Champion Windows & Doors, LLC.

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Grannis

\_\_\_\_\_  
Name of Person

Champion Windows & Doors, LLC

\_\_\_\_\_  
Firm/Company

2040 James Drive

\_\_\_\_\_  
Address

Oviedo, FL 32765

\_\_\_\_\_  
City/State and Zip Code

jason@championwindowanddoor.com

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

For further information concerning this matter, please call:

Jason Grannis

734

649-6200

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

18 NOV 13 PM 2:25

RECEIVED  
STATE  
DIVISION OF CORPORATIONS

## Page 1 of 3

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	Jason Grannis		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		2040 James Drive Oviedo, FL. 32762	<input checked="" type="checkbox"/> Change
AMBR	Jeffrey Reese		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		7787 Segovia Orlando, FL. 32822	<input checked="" 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.

Dated November 9, 2018

Josar Grannis  
Signature of a member or authorized representative of a member

Jason Grannis

Typed or printed name of signee