# 11800013555

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	,	





000312546590

05/14/18--01018--003 \*\*30.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

N COOPER MAY 15 2018

### COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

#### FLORIDA GLASS & INSTALLATION SERVICES, 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:

	LINWOOD M FEATHER	STON		
		Name of Person		····
	FLORIDA GLASS & INS	TALLATION SERVICE	S, LLC	
		Firm/Company		
	4780 PINE TREE DR #6			
	FLORIDA GLASS & INSTALLATION SERVICES, LLC  Firm/Company  4780 PINE TREE DR #6  Address  MIAMI, FL 33140  City/State and Zip Code  LMFEATHERSTON@GMAIL.COM  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  ( 954 494-9084  at ( Daytime Telephone Number  The following amount:  \$\Preceq \$30.00  Filing Fee & Described Copy Certificate of Status & Certified Copy Certificate of Status & Certificate of S			
	MIAMI, FL 33140			
		City/State and Zip Code		<del></del>
	LMFEATHERSTON@GM	AIL.COM		
	E-mail address: (	to be used for future annual	report notificat	tion)
For further information	concerning this matter, please c	all:		
BRITTON K BENTLEY	Y		4-9084	
Name o	of Person	Area Code	Daytime To	elephone Number
Enclosed is a check for t	the following amount:			
☐ \$25.00 Filing Fee				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Cliften Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA GLASS & INSTALI	LATION SERVICES, LLC	
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on 01-16-2018	and assigned
Florida document numberL18000013555		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>-</u>
(Principal office address MUST BE A STREET ADDRESS)		<b>a</b> Sign
		MA
	-	<b>−</b> 937
		<b>4</b> C8 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 ×
Enter new mailing address, if applicable:	·	💮 😩 हुन्
(Mailing address MAY BE A POST OFFICE BOX)		<b>9</b> ₹ 5
		<b>2</b> 3 3 4
		- <del>5</del>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		ter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	<u>.</u>
<del></del>	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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	BRITTON K BENTLEY	11783 SW 32ND STREET	<b>□</b> Add
		MIAMI, FL 33175	ĽI Kemove
			☐ Change
			G Aúú
			☐ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
		<del></del>	Add
			□ Remove
		<del></del>	☐ Change
			_□ Adá
		<del></del>	□ Remove
			☐ Change
			Add
			□ Remove
			□ Change

							····	
		• •						
							· · · · · · · · · · · · · · · · · ·	<del></del>
•								
		<del></del>		<del></del> .	<u> </u>			<del></del>
					<del></del>	<del>.</del>		
								= 5
<del></del>		<del> </del>						• ;
								MAY I
							•	<b>-</b>
				<del></del>				• OX A
		<del> </del>						
								TONO.
an effective ote: If th	late, if other than the e date is listed, the date must e date inserted in this blo effective date on the De	be specific and ock does not me	cannot be pri- ect the appl	icable statute	ing or more the ry filing requ	(option 90 days after forments, this	iling.) Pursuant	to 605.02
	specifies a delayed h day after the reco		ate, but n	ot an effe	ctive time,	at 12:01 a.	.m. on the	earlier
ated	5-3-2018	3	<del> </del>	·				
	•	/						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00