

L18000042199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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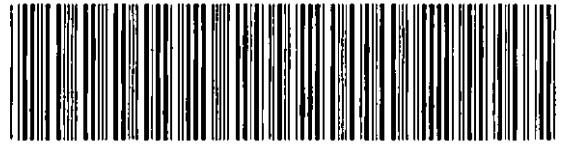
(Business Entity Name)

(Document Number)

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A. RIVERS
AUG 24 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M&V WINDOW SERVICES 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:

DAVILSON RODRIGUES

Name of Person

ADR ACCOUNTING SERVICES CORP.

Firm/Company

4699 N FEDERAL HWY SUITE 109E

Address

POMPANO BEACH, FL 33064

City/State and Zip Code

ACCOUNTINGSERVICES@DAVILSON.COM

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

For further information concerning this matter, please call:

DAVILSON RODRIGUES

954

543-2882

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 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
OF

M&V WINDOW SERVICES 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 02/15/2018 and assigned Florida document number L18000042199.

This amendment is submitted to amend the following:

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

M&V DAMARI SERVICES 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:

9316 BOCA GARDENS PKWY F

(Principal office address MUST BE A STREET ADDRESS)

BOCA RATON, FL 33496

Enter new mailing address, if applicable:

9316 BOCA GARDENS PKWY F

(Mailing address MAY BE A POST OFFICE BOX)

BOCA RATON, FL 33496

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:

New Registered Office Address:

Enter Florida street address

Florida

Civ

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

[illegible]

[illegible]

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 JULY 20 2023

MARCIO T DAMARI

Typed or printed name of signee