11800055063

(Re	questor's Name)	-
(Ade	dress)	· -
(Add	dress)	
·	·	
(Cit	y/State/Zip/Phone	- #1
(011)	prototorzipii none	<i>-</i>
PICK-UP	MAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do-	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
		İ





600313619616

05/22/18--01007--005 **25.00

18 MAY 22 AM BE 57

N COOPER MAY 2 4 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Wendy'S Glass and Window Repairs, 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:
Winely Turner Name of Person Wenely's Glass and Window Repairs, LLC Firm/Company
4171 Bonita Boach Rd. Address
Bonita Beat Spring 5, FL 34134 City/State and Zip Gode Wenlou 2 (a aol. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Wendy Turner at (239) 398-4002 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)} \$\Bigcup \text{\$\$\$\$\$\$\$\$55.00 Filing Fee & 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**

Wenely's 6/655 an	nd Window Regairs, L	LC
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>4/8000055063</u> .		ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.L.	C."
Enter new principal offices address, if applicable:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	SIA10
(Principal office address MUST BE A STREET ADDRESS)	- AY 2	<u> </u>
		AAA AAA AAAA
Enter new mailing address, if applicable:	**	RPOR
(Mailing address MAY BE A POST OFFICE BOX)	Si Si	ATTE.
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have		the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
	City Zip Code	 .
New Registered Agent's Signature, if changing Registered Ager	<u>nt:</u>	

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, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR =	Manager		
AMBR :	= Authorized Member		

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Randy Copeland	110 415+ AVENE. Naples, FL 34120	B Add
)	- Juapies,	□ Remove
			☐ Change
			Add
			Remove
			Change
			□ Кетюче
			Change
			Remove
			Change
		10.70	
			Remove
			☐ Change
			□ Remove
			Change

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
_			
_			
_			
,			
_			
-			
_		 130 ¥.	<u>~</u>
_	· · · · · · · · · · · · · · · · · · ·	SION	4803
_	······································	2 C	7.54 7.54 7.54
		78 - RPOR A	2∶
_	-	47 57	<u> </u>
_			
_			
	ve date, if other than the date of filing: $\frac{May}{17,2018}$ (optional)		
(If an effe Note:	betive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ent's effective date on the Department of State's records.	to 605,0207 be listed as	7 (3 s th
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier o	f:
Dated _	5-17. 2018		
	(my frame)		
	Signature of a member or authorized representative of a member	_	
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00