118000074545

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Buzzi Enterprises LLC Name of Limited Mability Company
The end	losed Articles of Amendment and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Graziano Ferrari Name of Person
	Firm/Company
	319 SW 13th Avenue
	Pompano Beach . Fl 33069
	City/State and Zip Code Kim @ assured Stoem Window, Com E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
	Kim Breighner at (754), 399 · 801/ Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
□ \$25	3.00 Filing Fee S \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

Buzzi Enter	prises 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 Florida document number <u>L18000074545</u> . This amendment is submitted to amend the following:	y were filed on March 22.	2018 and assigned
A. If amending name, enter the new name of the limited lial	bility company here:	
Same. The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Same	SECF DIVISIO 18 AL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same	FILED SPATE ROF CORPORATION IG 13 AH ID: 27
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		nter the name of the new
Name of New Registered Agent:	iane_	
New Registered Office Address:	Enter Florida street address	
	, Florid	aZin 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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Marco Buzzi	236 Newport P	Add
		236 Newport P Deerfield Beach	Remove
		J J 1	☐ Change
			🗀 Add
			Remove
			Change
			Remove
			Change
			Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove

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	AT 10
27	27

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Filing Fee: \$25.00