

L18000226016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

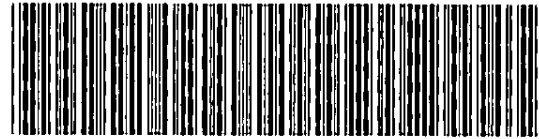
(Business Entity Name)

(Document Number)

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2019 MAR -4 PM 3:57
SECRETARY OF STATE

Amend

MAR 12 2019
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA SECURE 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:

MARK WOODLOCK, ESQ.
Name of Person

Woodlock Construction Law Firm, P.A.
Legal Firm Name
1350 Orange Avenue, Suite, 280
Winter Park, Florida 32789

City, State and Zip Code
MARK@WOODLOCKLAW.COM
E-mail address (to be used for future annual reports notifications)

For further information concerning this matter, please call:

MARK WOODLOCK, ESQ. at 407 409-5305
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount.

- \$25.00 Filing Fee
- \$70.00 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 727
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2019 MAR -4 PM 3:57

FLORIDA SECURE WINDOWS & DOORS, 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 09/24/2018 and assigned Florida document number L18000226016

This amendment is submitted to amend the following:

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

- N/A -

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:

- N/A -

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

- N/A -

(Mailing address MAY BE A POST OFFICE BOX)

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:

- N/A -

New Registered Office Address:

- N/A -

Enter Florida street address

- N/A -

Florida

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

- N/A -

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	RALPH E. FORTICH	9909 VENETIAN RIVER WAY TAMPA, FL 33619	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change ADDRESS
AMBR	SUNG JAE JUNG	9909 VENETIAN RIVER WAY TAMPA, FL 33619	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change ADDRESS
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

— N/A —

E. Effective date, if other than the date of filing: — N/A — (optional)

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. (Paragraph to M/S 0207 (3)(b))
Note: If the date inserted in this block does not meet the applicable summary filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(a) The date listed.
(b) The 90th day after the record is filed.

Dated 2/22/2015

Signature of a member or authorized representative of a member

RALPH E. FORTICH, AMBR

Typed or printed name of signer