

L190000 99219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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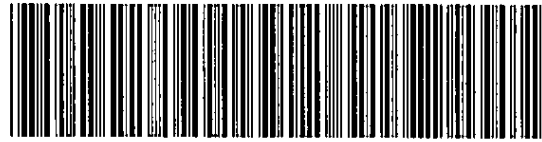
(Business Entity Name)

(Document Number)

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T GLASS

MAY 22 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AZUL SHOWER & GLASS, 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:

ZAFFALON, STEFANO J

Name of Person

AZUL SHOWER & GLASS

Firm/Company

2374 J AND C BOULEVARD

Address

NAPLES, FL 34109

City/State and Zip Code

szopper@agpfl.com

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

For further information concerning this matter, please call:

STEFANO ZAFFALON

239 285-6004

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AZUL SHOWER & GLASS, 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 04/10/2019 and assigned
Florida document number L19000099219.

This amendment is submitted to amend the following:

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

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:

15056 BLUE MARLIN TER

(Principal office address MUST BE A STREET ADDRESS)

BONITA SPRINGS, FL 34135

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

2374 J AND C BOULEVARD

Enter Florida street address

NAPLES

City

Florida 34109

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ZAFFALON, STEFANO J		<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

TITLE ZAFFALON, STEFANO J (MANAGER)

MAILING ADDRESS (UN) IS AFTER ZIP CODE PLEASE DELETE

PRINCIPAL ADDRESS IS CHANGE FOR (15056 BLUE MARLIN TERRACE, BONITA SPRINGS, FL 34135)

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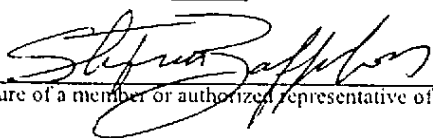
E. Effective date, if other than the date of filing: _____ **(optional)**

(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.) Pursuant to 605.0207 (3)(b)

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.

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

Dated MAY, 06, 2019


Signature of a member or authorized representative of a member

STEFANO ZAFFALON

Typed or printed name of signee

State of Florida
Department of State

I certify the attached is a true and correct copy of the Articles of Organization of AZUL SHOWER & GLASS, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on April 10, 2019 effective April 10, 2019, as shown by the records of this office.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L19000099219.

Authentication Code: 190418120901-800327777348#1

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NOTARY STATE
TALLAHASSEE, FLORIDA

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Eighteenth day of April, 2019



Laurel M. Lee

Laurel M. Lee
Secretary of State