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C. GOLDEN JUL 1 1 2019

## **COVER LETTER**

Division of Co			
SUBJECT: PRIC	ELESS WINDOW	IS & DOORS LLC	
-	Name of Lir	mited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	George T.	Price Name of Person	
	/	Name of Person	
		·	
		Firm/Company	
	5965 Cari	bbean Blvd Address	
		Address	<u> </u>
	West Polon	Bruch FL 334	·07
		City/State and Zip Code	
	priceless wind	Bruch FL 3346 City/State and Zip Code  Lows. Loor a gmail. (to be used for future animal report notif	com
For firsther information of			ication)
	concerning this matter, please c		
George T.	Price	at ( <u>561</u> ) <u>574</u> Area Code Daytime	-7/80
Name (	of Person	Area Code Daytime	: Telephone Number
		·	
Enclosed is a check for t	he 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)

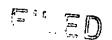
MAILING ADDRESS:

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

## ARTICLES OF AMENDMENT TO · ARTICLES OF ORGANIZATION OF



[RICELESS WINDOW	US & DOORS L	LC 2019 JUN 27 PM 4: 26
( <u>Name of the Limited Liabi</u> (À Flori	lity Company as it now appea da Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L1900013931</u>	Company were filed on _	, , ,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company h	<u>iere</u> :
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the	designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<del></del>	
B. If amending the registered agent and/or regi	stored office address s	
registered agent and/or the new registered office add	Iress here:	our records, enter the name of the ne
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Flo	orida street address
		, Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent	and agree to act in this	capacity. I further agree to comply with th

If Changing Registered Agent, Signature of New Registered Agent

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.

MGR = M $MBR = A$	anager uthorized Member		
<u> </u>	<u>Name</u>	Address	Type of Actio
MGR	George Thomas Price	5965 Caribbean Blvd West Palm Beach FL 33407	Add
			Remove
			Change
	<u> </u>		Add
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n effi <u>te:</u>	ve date, if other than the date of filing:
he	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o 90th day after the record is filed.
	Merry 7 Five Signature of a member or authorized representative of a member
ed_	.*3
ed_	Henry Thin

Page 3 of 3

Filing Fee: \$25.00