## L200000 95021

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
ertified Copies	_ Certificates	s of Status
Special Instructions to I	Filling Officer:	
		<u>-</u>

Office Use Only



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11/15/20

## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	rporations			
SUBJECT: Kingt	ang Impact Windo	WS & DOOTS LLC		
	Amendment and fee(s) are sub ondence concerning this matter			
	0scar_Qr	Mill Carl Carlon Name of Person		
	<u>Kingiana Ir</u>	npact Windows (Doo	15	) ) )
	1325 W 685	Address		SCT = 1
		3:3014 City/State and Zip Code		F 1 7 PM 2: 47
C. Carlo information		degmanl.com to be used for future annual report noti	fication)	-1
For minner information c	concerning this matter, please c	au.		
	n   a n a of Person	at ( <u>786</u> ) <u>263.</u> Area Code Daytim	2 7 7 7 e Telephone Number	
Enclosed is a check for t	he following amount:			
S25.00 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)	
<u>Mailing Addres</u> Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KINGTANA IMPACT WINCOM (Name of the Limited Liability Company (A Florida Limited Liability Company)	S & DOORS LLC	
(A Florida Limited Lie	ibility Company)	
The Articles of Organization for this Limited Liability Company w	vere filed on04   02   20	20 and assigned
Florida document number <u>L20000095021</u>	,	
This amendment is submitted to amend the following:		
•	ter annual body	
A. If amending name, enter the new name of the limited liabili	ty company nere:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" o	or the abbreviation "L.L.C."
Farm and against officer address if annimable	·	2927
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Control of the contro		<b>*</b>
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		3/
B. If amending the registered agent and/or registered office ad	dress on our records, enter th	e name of the new registered
agent and/or the new registered office address here:		,
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p		
accept the obligations of my position as registered agent as pr	• •	-
being filed to merely reflect a change in the registered office a		

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	Address	Type of Action
MER	Saphicher Gonzalez	4201 MyrHewood Cir E	□ Add
		Palm Brach Gardens, FL	Remove
		33419	
***			🗀 Add
			□ Remove
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	<del>}</del>
fective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more that  ote: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	(optional) in 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the is filed.	earlier of: (b) The 90th day after the
ned <u>September</u> 26. 2020.	
	,

Filing Fee: \$25.00