L20000335425

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bodanient Namber)
Cadified Carries Cadificator of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300385526983

04.11/20 9901 060 990....

2022 APR 13 PH 12: 56

A. BUTLER MAY 16 2022

COVER LETTER

SURIFC	1/11		`	•
SOBOLE			nited Liability Company	
The enclo	osed Articles of	Advanced Ceramic Installation LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 Cuy/State and Zip Code s1955shannon@gmail.com E-maif address: (to be used for future annual report notification) rmation concerning this matter, please call: at (
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Susan Shannon		
			Name of Person	
		Advanced Ceramic Install	ation LLC	
			Firm/Company	<u> </u>
		1330 Mariposa Dr NE		
			Address	
	Advanced Ceramic Installation LLC Name of Limited Liability Company Advanced Articles of Amendment and fee(s) are submitted for filling. See enclosed Articles of Amendment and fee(s) are submitted for filling. Ease return all correspondence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 City/State and Zip Code s1955shannon@gmnil.com E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: san Shannon Name of Person Area Code S55.00 Filing Fee & Certificate of Status Certificate Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee			
		ramic Installation LLC Name of Limited Liability Company mendment and fee(s) are submitted for filing. lence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 Ciny/State and Zip Code s1955shannon@gmail.com E-mail address (to be used for future annual report notification) cerning this matter, please call: at (
	Division of Corporations Advanced Ceramic Installation LLC The Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filing. turn all correspondence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 City/State and Zip Code \$1955shannon@gmail.com E-mail address: (to be used for future annual report notification) etr information concerning this matter, please call: annon Name of Person Area Code Daytime Telephone Number Area Code Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee			
		Ceramic Installation LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. ondence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 City/State and Zip Code s 1955shannon@gmail.com E-mail address: (to be used for future annual report notification) rencerning this matter, please call: Area Code 1 S30.00 Filing Fee & Certificate of Status Certificate of Status Certificate Copy (additional copy is enclosed) Section Registration Section Ortporations The Centre of Tallahassec		
For furthe	r information c	oncerning this matter, please c	all:	
Susan Sh	annon		- · · · - · · · - · · · · · · · · · · ·	
	Name o	ramic Installation LLC Name of Limited Liability Company mendment and fee(s) are submitted for filing. lence concerning this matter to the following: Susan Shannon Name of Person Advanced Ceramic Installation LLC Firm/Company 1330 Mariposa Dr NE Address Palm Bay/Florida 32905 City/State and Zip Code \$1955shannon@gmail.com E-mail address: (to be used for future annual report notification) cerning this matter, please call: at (\frac{321}{Area Code}) \frac{271-9427}{Daytime Telephone Number} ollowing amount: \[\square \frac{330.00 \text{ Filing Fee} & \text{ Certified Copy (additional copy is enclosed)}} \] Street Address: Registration Section Division of Corporations The Centre of Tallahassee		
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
F	Registration S	Section	Registration Sec	
F	P.O. Box 632	7	The Centre of T	allahassee
7	allahassee, F	1L 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

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

FILED

2022 APR 13 PH 12: 56

Advanced Ceramic Installation 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 October 22, 2020 and assigned
Florida document number L20000335425	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
Isle Work LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	1330 Mariposa Dr NE
(Principal office address MUST BE A STREET ADDRESS)	Palm Bay, FL 32905
Enter new mailing address, if applicable:	1330 Mariposa Dr NE
(Mailing address MAY BE A POST OFFICE BOX)	Palm Bay, FL 32905
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new register
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	·
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
			□Add
			Remove
		-	DChange
			□Add
			Remove
			□Change
			□ Add
			□Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

<u> </u>					
	·				
	·			-	
		· · · · · · · · · · · · · · · · · · ·			
	-				
			- " *		
			· .		
			-		
·				 	
<u></u>	·				
		·····			
···					
					
1					
Effective date, if other than	()4/1 the date of filing:	1/2022		(optional)	
f an effective date is listed, the date Note: If the date inserted in thi	must be specific and cannot b	be prior to date of fili	ng or more than 90 day	s after filing.) Pursuant to	605.0207
document's effective date on th	Department of State's re	ecords.	ry ming requirement	is, this date will not be	nsieu as
record specifies a delayed efferd is filed.	ctive date, but not an effe-	ctive time, at 12:01	l a.m. on the earlier	of: (b) The 90th day	after the
d is filed.					
April 11	2022				
) ()					
Lusan	- Joan	Sha	nnon	_	
	Signature of a member of	or authorized represe	intative of a member		_
Susan Jean Shannon					
	Typed	or printed name of si	gnec	 -	_