# LZ1000133688

| (Re                     | questor's Name)   | <del></del>     |
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| (Cit                    | y/State/Zip/Phone | <del>: #)</del> |
| PICK-UP                 | ☐ WAIT            | MAIL            |
| (Bu                     | siness Entity Nam | ne)             |
| (Do                     | cument Number)    |                 |
| Certified Copies        | _ Certificates    | of Status       |
| Special Instructions to | Filing Officer:   |                 |
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## FLORIDA DEPARTMENT OF STATE

Division of Corporations

June 28, 2021

PEDRO F. TUPAN 3204 NE 8 COURT 2 POMPANO BEACH, FL 33062

SUBJECT: TUPAN WINDOWS & DOORS LLC

Ref. Number: L21000133688

We have received your document for TUPAN WINDOWS & DOORS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce Corporate Records Supervisor II

www.sunbiz.org

Letter Number: 121A00014735

#### **COVER LETTER**

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

| Division of Cor               | porations                                    |   |                 |             |                  |
|-------------------------------|--|---|-----------------|-------------|------------------|
| SUBJECT: TUPAN WI             | NDOWS & DOORS LLC                            |   |                 |             |                  |
| SUBJECT:                      |  | ited Liability Company  |                 |             |                  |
| The enclosed Articles of a    | Amendment and fee(s) are sub                 | mitted for filing.  |                 |             |                  |
| Please return all correspo    | ndence concerning this matter                | to the following:   |                 |             |                  |
|                               | PEDRO F TUPAN                                |   |                 |             |                  |
|                               |  | Name of Person  |                 |             |                  |
|                               | TUPAN WINDOWS & DO                           | OORS LLC  |                 |             |                  |
|                               |  | Firm/Company  |                 |             |                  |
|                               | 3204 NE 8th CT #2                            |   |                 |             |                  |
|                               | -  | Address   |                 |             |                  |
|                               | POMPANO BEACH, FL3                           | 3062  |                 |             |                  |
|                               |  | City/State and Zip Code   |                 |             |                  |
|                               | deope topan (E-mail address:                 | 6 CMAIL COM to be used for future annual report notifical           | ion)            | ~}          |                  |
| For further information co    | oncerning this matter, please co             |   |                 | 2021 JUN -9 | ; <del></del>    |
| Danielle Higuchi              |  | at ( 754 ) 422-0107   |                 |             | ب <i>ه</i><br>ده |
| Name of                       | f Person                                     | Area Code Daytime Te  | elephone Number | PM 2: 3     | عد بور<br>معمر   |
| Enclosed is a check for th    | e following amount:                          |   |                 |             |                  |
| □ \$25.00 Filing Fee          | ■ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified C     | of Status & |                  |
| Mailing Addres Registration S |  | Street Address:<br>Registration Section                             | on              |             |                  |
| Division of Corporations      |  | Division of Corpor  |                 |             |                  |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ty Company as it now appears on our records.) a Limited Liability Company) |   |  |  |
|--|---|--|--|
| Company were filed on  | a   | nd assig   | gned   |
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| ited liability company here:   |   |  |  |
| ited Liability Company," the designation "LLC" or th                       | e abbreviat   | ion "L.L   | .C."   |
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| d office address on our records, <u>enter the n</u>                        | ame of t  |  | regist   |
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| Florida  | , .   |  |  |
| <u>i</u>   | ited liability company here:  ited Liability Company." the designation "LLC" or the second address on our records, enter the n.  Enter Florida street address | ited liability company here:  ited Liability Company," the designation "LLC" or the abbreviate (LESS)  I office address on our records, enter the name of the control of th | and assignment of the street address on our records, enter the name of the sew |

#### 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 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  |
|--------------|-------------------------|---|-----------------|
| AMBR         | PEDRO FELIPE ARBO TUPAN | 3204 NE 8th CT #2, Pompano Beach FL 33062 | 🗆 Add           |
|              |                         | Change from MGR to AMBR                   | □Remove         |
|              |                         |   | Change          |
| MGR          | DANIELLE HIGUCHI        | 3204 NE 8th CT #2, Pompano Beach FL 33062 | □Add            |
|              |                         | Change from AMBR to MGR                   | □Remove         |
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| ote: If the  | te, if other than<br>ate is listed, the dat<br>date inserted in th                        | ha Danastmant a     | f State's recor- | ds.                                   |                  |   |                |               |   |
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