

10/10/23, 11:39 AM

Division of Corporations

**L21000313396**  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To:

Division of Corporations  
 Fax Number : (850)617-6383

From:

Account Name : WF TAXES AND MORE INC.  
 Account Number : 120200000043  
 Phone : (772)879-0010  
 Fax Number : (772)281-5520

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Wftaxes.office@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 AMIGOS CONSTRUCTION SUPPLIES, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
| Page Count            | 05      |
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Electronic Filing Menu

Corporate Filing Menu

Help

S. ROBERTO

OCT 11 2023

# **COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AMIGOS CONSTRUCTION SUPPLIES, 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:

MIGUEL R TREJO

Name of Person

AMIGOS CONSTRUCTION SUPPLIES, LLC

Firm/Company

713 NE DIXIE HIGHWAY UNIT B

Address

JENSEN BEACH, FL 34957

City/State and Zip Code

sales@amigoscustomdoors.com

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

For further information concerning this matter, please call:

MIGUEL R TREJO

772 879-0010  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

AMIGOS CONSTRUCTION SUPPLIES, 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 07/08/2021 and assigned  
Florida document number L21000313396.

This amendment is submitted to amend the following:

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

USA Amigos Doors & Molding Supplies, LLC

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:

713 NE DIXIE HIGHWAY UNIT B

(Principal office address MUST BE A STREET ADDRESS)

JENSEN BEACH, FL 34957

Enter new mailing address, if applicable:

1681 SW BELLEVUE AVE

(Mailing address MAY BE A POST OFFICE BOX)

PORT ST LUCIE, FL 34953

**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:

MIGUEL R TREJO

New Registered Office Address:

1681 SW BELLEVUE AVE

Enter Florida street address

PORT ST LUCIE

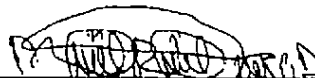
, Florida 34953

City

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**

[illegible]

[illegible]

**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.

3