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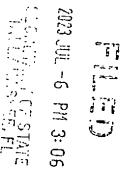
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Y. SCOTT :AUG 12 2023

## **COVER LETTER**

TO: Registration So Division of Co			<b>.</b>	
LOVE GA	RAGE DOORS LLC			
SUBJECT:	Name of Lin	nited Liability Company	<u></u>	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
	ondence concerning this matter			
	EBRIAN MEDEROS DIA	s Z		
		Name of Person		
	LOVE GARAGE DOORS	SLLC	(·*	2023
		Firm/Company		
	3207 43RD ST W			-6
		Address	<u> </u>	PH II
	LEHIGH ACRES, FL 339	71	en Ez	H 3: 06
		City/State and Zip Code		36
	MARIADELOSANGELES	<del>-</del>		
For further information c	E-mail address; ( oncerning this matter, please c	to be used for future annual report not	fication)	
MARIA DE LOS ANGE		786 237-1417		
<del></del>	f Person	at ()	e Telephone Number	_
Enclosed is a check for th	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>S60.00 Filing Certificate of Certified Cop (additional copy)</li> </ul>	Status &
Mailing Address		Street Address:		
Registration S  Division of C		Registration Sec Division of Cor		
P.O. Box 632	7	The Centre of T	•	
Tallahassee, I	FL 32314	2415 N. Monroe	e Street, Suite 810	

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOVE GARAGE DOORS LLC	
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ity Company)
The Articles of Organization for this Limited Liability Company were	e filed on 06/28/2023 and assigned
Florida document number 1.22000003116	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
LOVE GARAGE DOORS FL LLC	
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202
(Principal office address MUST BE A STREET ADDRESS)	
<del></del>	10° 00 1°
Enter new mailing address, if applicable:	AS PIN
(Mailing address MAY BE A POST OFFICE BOX)	777 G
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Filing Fee: \$25.00

Typed or printed name of signee