# LZZ000034Z04

(Red	uestor's Name)	
(Add	iress)	
	iress)	
(7.00		
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Day	arran o ant Bluma ha a l	
(DOC	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	filing Officer:	
		}

Office Use Only



900385983729

04/20/22--01008--028 \*\*25.00

22 APR 20 PM 1: 39

T. MATTHEWS

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Armour Shield Auto Glass 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:
Samonte Armour Name of Person
Armour Shield Auto Glass Firm/Company
255 5 orange Ave suite 104-1088
Orlando, FL 32801 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Samonte Armour at (313) 458-1577  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status 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

ARTICLES OF ORGANIZATION CILLID SECRLITARY OF STATE OF ST

Armour Shi	ield Au	to Glass22 APR 20 PP	1 1:40
· · · · · · · · · · · · · · · · · · ·		ny as it now appears on our records.) Liability Company)	<del></del> _
The Articles of Organization for this Limited Li Florida document number		were filed on 01 18 202	2 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the w			
Enter new principal offices address, if applica	able:	255 5 Orange A Fuite 104-1088 orlando, FL 3200	Ve
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	255 5 orange A Suite 104-1038 Orlando FL 32901	NE
B. If amending the registered agent and/or reagent and/or the new registered office addres		address on our records, enter the	name of the new registere
Name of New Registered Agent:	NA		
New Registered Office Address:	AM	Enter Florida street address	
		, Florida	
	<del></del>	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 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
N/A N/A	MA	ALA	□Add
			□Remove
		☐ Change	
	<del></del>	□Add	
			□Remove
			Change
	<del></del>		□Add
			□Remove
		·	Change
		□Add	
			□Remove
			Change
		□Add	
			□Remove
		<del></del>	Change
		□Add	
			□Remove
			□Change.

lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an ei Note:	tive date, if other than the date of filing: 04 15 2072 (optional)  Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the rece cord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	5 mil tess
	5miles
	Signature of a member or authorized representative of a member
	Somente A. (Mour Typed or printed name of signee