LZZ000091766

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SECRETARY OF SIGHT

COVER LETTER

TO:	Registration Se Division of Cor			•				
SUBJI		indows & Doors LLC						
301371	Name of Limited Liability Company							
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.					
Please	return all correspo	ard Windows & Doors LLC Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. rrespondence concerning this matter to the following: Ruth Ramos Name of Person Amazing Windows & Doors LLC Firm/Company 4952 Island Club Drive Address Tamarac, FL 33319 City/State and Zip Code browardwindows22@gmail.com E-mail address: (to be used for future annual report notification) attion concerning this matter, please call: Same of Person at (754 Area Code) Daytime Telephone Number						
		Ruth Ramos						
			Name of Person					
		Amazing Windows & Door	rs LLC	Code 230-8615 Daytime Telephone Number				
			Firm/Company					
		4952 Island Club Drive						
			Address					
		Tamarac, FL 33319						
			•					
				on)				
For fur	ther information e		•	,				
Ruth F	Ramos							
	Name o	f Person	Area Code Daytime Tel	ephone Number				
Enclos	ed is a check for th	ne following amount:						
□ \$2	5.00 Filing Fee	-	Certified Copy	Certificate of S Certified Copy				

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

Broward Windows & Doors I I C			PR-
	Liability Compa	ny as it now appears on our records.)	
(A)	Florida Limited	Liability Company)	To 🚬 M
The Articles of Organization for this Limited Liab Florida document number L22000091766	ility Company	were filed on 2/8/2022	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, <u>enter the new name of th</u>	ne limited liab	oility company here:	
Amazing Windows & Doors LLC			
The new name must be distinguishable and contain the work	ls "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le•	4952 Island Club Drive	
(Principal office address MUST BE A STREET ADDRESS)		Tamarac, FL 33319	
Enter new mailing address, if applicable:		Same as above	
(Mailing address MAY BE A POST OFFICE BC	<u> </u>		
		address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	N/A		<u> </u>
Articles of Organization for this Limited Liability Company were filed on 2/8/2022 and assigned did document number L22000091766 samendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: azing Windows & Doors LLC new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" er new principal offices address, if applicable: meipal office address MUST BE A STREET ADDRESS) Tamarac, FL 33319 Same as above illing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:			
		Enter Florida street address	
		Flori	da.
	 		

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A		🖸 Add
			□Remove
			□Change
			DAdd
			□ Remove
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). 11 amei	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	2/22/2022
(If an effe	re date, if other than the date of filing: 3/22/2022 (optional) ctive 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 (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that it is effective date on the Department of State's records.
he record ord is file	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 d.
Dated _	3/22/22 Pullud
	Signature of a member or authorized representative of a member
	Ruth Rames
	Typed or printed name of signee

Filing Fee: \$25.00