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COVER LETTER

TO:

	egistration Se ivision of Cor				
SUDIECT		ws, doors & more LLC			
SUBJECT	·	Name of Lim	ited Liability Company		
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
Please retu	rn all correspo	ndence concerning this matter	to the following:		
		MANUEL FORTUNA			
			Name of Person		
		BLUE WINDOWS, DOOR	RS & MORE LLC		
			Firm/Company		
		13454 SW 91ST TER			
	Address				
	MIAMI, FL , 33186				
			City/State and Zip Code		
		E-mail address: (to be used for future annual report no	tification)	
For further	information c	oncerning this matter, please ca	all:		
MANUEL	FORTUNA		786 6832388		
	Name o	f Person	Arca Code Daytir	ne Telephone Number	
Enclosed is	s a check for th	ne following amount:			
\$25,00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration S	ection		
	_	Corporations	Division of Co	orporations	
	O. Box 632		The Centre of		
L	'allahassee, l	FL 32314	Z+15 IN. IVIONE	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

	9-	2022 111	W 7
Blu	e Win Low, Dor Liability Company as it now ap Florida Limited Liability Compa	ors of more U	AMII: 11
(<u>Name of the Limited</u> (A	Liability Company as it now ap Florida Limited Liability Compa	pears on our records. TALE,	AHASSEF EL
The Articles of Organization for this Limited Liab	oility Company were filed or		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liability compan	<u>v here</u> :	
The new name must be distinguishable and contain the word	ds "Limited Liability Company,"	the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)			
			
• • • • • • • • • • • • • • • • • • • •	•	ur records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	r Florida street address	
	City	Florida	Zin Code
	Çiri)		Target Salvana

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
CEO	MANUEL FORTUNA	13454 SW 91ST TER	□ Add
		MIAMI, FL, 33186	□Remove
			□Change
			[Z]Add
			□Remove
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