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2024 JUL 17 FN 3: 14

Hello,

I have included two copies of the form enclosed. I don't know why the printer wouldn't let me print one sided, I have tried many times to reprint repeatedly print (included turning off the "print on both sides" feature. So, if you needed the form to be one sided for scanning purposes or any other reason, your team will be able to "stack" the pages together to form a one-sided version...

Again, my apologies. I hope I didn't cause a headache for anyone at the office! If it did (I'm sorry), I hope that this would help at least! Thank you, thank you!

- Grant Kazi

COVER LETTER

TO: Registration Section **Division of Corporations**

SECURITY SUBJECT:	GLAZE, LLC		
	Name of Lim	ned Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	GRANT KAZI		
		Name of Person	***************************************
	SECURITY GLAZE, LLC	:	
		Firm/Company	
	7023 BANYAN BLVD		
	· ·	Address	
	LOXAHATCHEE, FL, 33	470	
	561GRANT@GMAIL.CO	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	fication)
For further information c	oncerning this matter, please c	all:	
GRANT KAZI		561 5077071 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
S25.00 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

SECURITY GLAZE, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>08-02-2023</u>	and assigned
Torida document number L23000363157		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lial	pility company here:	
FEDERAL SECURITY INSTITUTE, LLC		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	r the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		202
Principal office address MUST BE A STREET ADDRESS)		(H
		
See		
Enter new mailing address, if applicable:		ــــبـــــــــــــــــــــــــــــــــ
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter the</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florio	da_
	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 tiled 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

Title	Name	Address	Type of Action
			□Add
			☐Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
		 	□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
40		·	
			□Remove
			7Changa

GRANT KAZI

Typed or printed name of signee