8/24/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000227868 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949

Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DURALEE FABRICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25,00

Electronic Filing Menu Corporate Filing Menu

Help

S. WARREN

171

COVER LETTER

2017-08-24 11 54 35 CST

_	istration Section ision of Corporations			
SUBJECT:	Duralee Fabrics LLC			
SUBJECT	Name of Foreign L	limited Liabili	ty Compan	У
Dear Sir or	Madam:			
The enclose	d application, certificate and fee(s) are	submitted for	filing.	
Please retur	n all correspondence concerning this n	natter to the fo	llowing:	
Joanne Nussi	กลนกา			
	Name of Person			
The Robert A	illen Duralee Group, LLC			
	Firm/Company			
49 Wireless I	Blvd Suite 150			
	Address			
Hauppeuge,	NY 11783			
	City/State and Zip Code			
	tradgroup.com			
E-mail ad	ldress: (to be used for future annual re	port notification	on)	
For further	information concerning this matter, pl	ease call:		
Johnne Nuss	taum a	.()	2738800	X4220
	Name of Person	Area Code	& Daytime	Telephone Number
Reg Div Clir 266	REET/COURIER ADDRESS: gistration Section rision of Corporations from Building it Executive Center Circle lahassee, Florida 32301		Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314
☐ \$25 Fili	Certificate of Status	\$55 Filin Certified	g Fee & Copy	S60 Filing Fee, Certificate of Status & Certified Copy
CR2E055 (9/1	19)	2		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of	
State: Duralee Fabrics LLC	
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)	
2. The Florida document number of this limited liability company is: M17000003153	
3. Jurisdiction of its organization: 4. Date authorized to do business in Florida: 4/12/2017	
SECTION II (5-9 complete only the applicable changes) The Robert Allen Duralee Group, ELC (must contain "Limited Liability Company, " "L.L.C.," or "ELC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The afternate name must contain "Limited Liability Company," "L.L.C." or "L.L.C.")	_
6. If amending the registered agent and/or registered office; address on our records, enter the name of the new registered agent and/or the new registered office address here:	11 == [11
Name of New Registered Agent:	_
New Registered Office Address: Enter Florida Street Address Florida City Zip Code	
City , Florida 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 limbed liability company has been notified in writing of this change.	

3. If the amendment changes person, title or capacity in accordance with 605.0992 (1)(e), indicate that change:					
Fitle/ Capacity	<u> Магж</u>	<u>Address</u>	Type of Action		
			Remove		
			Add		
			Remove		
			Add		
			Remove		
			Add		
			Remove		
		· · · · · · · · · · · · · · · · · · ·	Remove		
aforementioned as	the law of which this entity is or	by the official having custody of rec	ords In the		
	Lee Silberman		_ 3		
		erinted name of signed ng Fee: \$25.00	9: 06 9: 06		



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'DURALEE FABRICS LLC',

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'THE

ROBERT ALLEN DURALEE GROUP, LLC' ON THE TWENTY-THIRD DAY OF

JUNE, A.D. 2017, AT 4:58 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY TH-T THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

.::



Authentication: 203112934

Date: 08-24-17

6203332 8320 SR# 20175869489