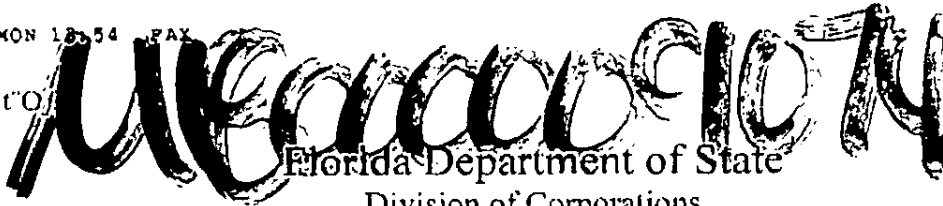


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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

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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 : TODD D. KAPLAN
Account Number : 120130000030
Phone : (941) 907-0006
Fax Number : (941) 487-5371

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

Email Address: tkaplan@icardmerrell.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
UNIVERSAL WINDOW SOLUTIONS SUBSIDIARY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

COVER LETTER ((H180003053863))

TO: Registration Section
Division of Corporations

SUBJECT: Universal Window Solution Subsidiary, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

~~The enclosed application, certificate and fee(s) are submitted for filing.~~

Please return all correspondence concerning this matter to the following:

Todd D. Kaplan, Esq.

Name of Person

Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A.

Firm/Company

8470 Enterprise Circle, Suite 201

Address

Bradenton, FL 34202

City/State and Zip Code

tkaplan@icardmerrill.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd D. Kaplan

Name of Person

at (941) 907-0006

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

FILED
OCT 22 A 10 57

((H180003053863))

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: Universal Window Solutions Subsidiary, LLC

Enter new principal office address, if applicable: _____

(Principal office address)
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable: _____

(Mailing address)
MAY BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: M180000090743. Jurisdiction of its organization: Delaware4. Date authorized to do business in Florida: 10/4/2018

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Universal Window Solutions, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(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 alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
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 Changing Registered Agent, Signature of New Registered Agent

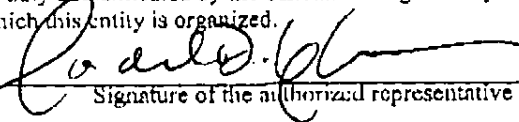
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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Todd D. Kaplan

Typed or printed name of signer

Filing Fee: \$25.00

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((H180003053863))

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVERSAL WINDOW SOLUTIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIVERSAL WINDOW SOLUTIONS, LLC" WAS FORMED ON THE ELEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

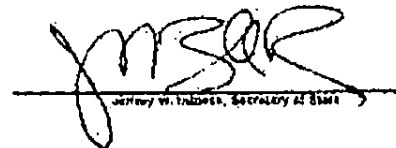
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SR# 20187030156

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 203567102

Date: 10-08-18

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10/22/2019 MON 13:54 FAX

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10/05/2018 FRI 9:23 FAX

0003/004

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Delaware

The First State

Page 1

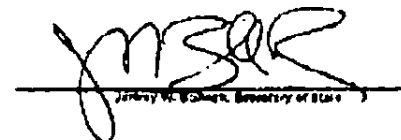
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "UNIVERSAL WINDOW SOLUTIONS SUBSIDIARY, LLC", CHANGING ITS NAME FROM "UNIVERSAL WINDOW SOLUTIONS SUBSIDIARY, LLC" TO "UNIVERSAL WINDOW SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE FIFTH DAY OF OCTOBER, A.D. 2018, AT 9:13 O'CLOCK A.M.

FILED
OCT 22 A 9:37



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SR# 20187001660

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 203556649
Date: 10-05-18

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State of Delaware
Secretary of State
Division of Corporations
Delivered 09:13 AM 10/05/2018
FILED 09:13 AM 10/05/2018
SR 20187001620 - File Number 7053120

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF UNIVERSAL WINDOW SOLUTIONS SUBSIDIARY, LLC**

1. The name of the limited liability company is: Universal Window Solutions Subsidiary, LLC.

2. The Certificate of Formation of the limited liability company is hereby amended by amending paragraph 1, which shall read in its entirety as follows:

1. The name of the limited liability company is: Universal Window Solutions, LLC.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment on the 4th day of October, 2018.


Name: Robert H. Smith
Its: President

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