

11190000009210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200428915542

11:33



OFFICE OF
CORPORATION
AND
BUSINESS
REGISTRATION

2024 MAY 21 AM 9:28

RECEIVED

SECRET

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
...
850.656.7953

REQUEST DATE 5/21/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1257794

ORDER ENTITY

WINDOWMAN OF SOUTH FLORIDA - BTP, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

WINDOWMAN OF SOUTH FLORIDA - BTP, LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "W" or "M" with a stylized flourish.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**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: WindowMan of South Florida - BTP, LLC

Enter new principal office address, if applicable: _____

(Principal office address

1333 3rd Avenue S. Suite 403

MUST BE A STREET ADDRESS)

Naples, FL 34102

Enter new mailing address, if applicable: _____

(Mailing address

1333 3rd Avenue S. Suite 403

MAY BE A POST OFFICE BOX)

Naples, FL 34102

2. The Florida document number of this limited liability company is: M19000008270

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: August 26, 2019

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

5. New name of the limited liability company: WindowMan of South Florida, 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.

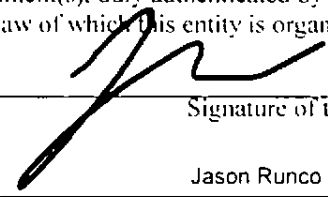
If Changing Registered Agent, Signature of New Registered Agent

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
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_____	_____	_____	<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
Jason Runco

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "WINDOWMAN OF SOUTH
FLORIDA - BTP, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING
ITS NAME TO "WINDOWMAN OF SOUTH FLORIDA LLC" ON THE SIXTEENTH
DAY OF MAY, A.D. 2024, AT 11:05 O'CLOCK A.M.

2024 MAY 16 11:05 AM
DELAWARE



7553359 8320
SR# 20242266553

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203509787
Date: 05-20-24