

JUL-28-2010 10:38

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

JUL 29 2010

From:

Account Name : AIT PLUS CONSULTING
Account Number : I20080000061
Phone : (407) 582-9830
Fax Number : (407) 582-9832

EXAMINER

****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
FLORIDA MARBLE AND TILE, LLC**

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

10 JUL 28 AM 8:45

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FLORIDA MARBLE AND TILE, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CLEITON DELMEN E. DE SOUZA

Name of Person

FLORIDA MARBLE AND TILE, LLC

Firm/Company

5542 ARNOLD PALMER DR APT. 8203

Address

ORLANDO, FL 32811

City/State and Zip Code

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

For further information concerning this matter, please call:

CLEITON DELMEN E. DE SOUZA

Name of Person

at (407)

404-9099

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 28 AM 8:45

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CLEITON DELMEN E. DE SOUZA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/10/2008 and assigned
Florida document number 108000057312.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "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)

5542 ARNOLD PALMER DR APT. 8203

ORLANDO, FL 32811

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5542 ARNOLD PALMER DR APT. 8203

ORLANDO, FL 32811

B. 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:

Name of New Registered Agent:

CLEITON DELMEN E. DE SOUZA

New Registered Office Address:

5542 ARNOLD PALMER

Enter Florida street address

ORLANDO

City

Florida

32811

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 608, 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.

Cleiton Delmen E. de Souza
If Changing Registered Agent, Signature of New Registered Agent

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JUL 28 4:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

... If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:


MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Cleiton Delmen E.de Souza	5542 Arnold Palmer apt. 8203 Orlando, FL 32811	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Wagner Jose de Souza	5542 Arnold Palmer apt. 8203 Orlando, FL 32811	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Eli Rodrigues	3407 Hagan Ave Orlando, FL 32819	<input type="checkbox"/> Add <input checked="" 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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July, 27, 2010.


Signature of a member or authorized representative of a member

Eli Rodrigues

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00