

L15000151077

Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6383

From: Account Name : ALPHA BUSINESS CONSULTING, LLC
 Account Number : I20080000061
 Phone : (407) 582-9830
 Fax Number : (407) 294-7677

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****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 DECORPLAS:FLOORING&COVERINGS LLC

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J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DECORPLAS:FLOORING&FLOORING 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:

LUCY RODRIGUEZ

Name of Person

DECORPLAS:FLOORING&FLOORING LLC

Firm/Company

220 CHERRY LAUREL DR

Address

ORLANDO, FL 32835

City/State and Zip Code

pinheiromaria@att.net

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

For further information concerning this matter, please call:

MARIA PINHEIRO

407 582-9830

Name of Person

at ()

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DECORPLAS:FLOORING&COVERING LLC

(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 09/09/2015 and assigned
Florida document number 115000151077

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	CRISTIANO M LIMA	6040 OAKBEND ST APT 13306	<input type="checkbox"/> Add
		ORLANDO, FL 32835	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	FABIO DE SOUZA MARIANO	220 CHERRY LAUREL DR	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32835	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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