

L150000181438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

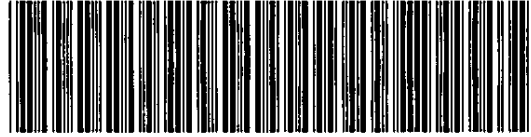
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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RICE & ROSE
LAW FIRM

November 13, 2015

Department of State
Division of Corporations
Registration Section
Post Office Box 6327
Tallahassee, FL 32314

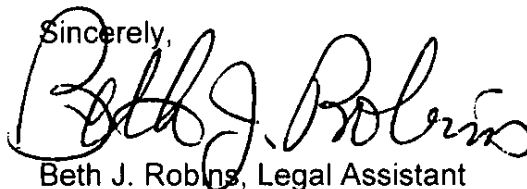
RE: 2 Go Flooring, LLC

Dear Sir or Madam:

Enclosed are Articles of Amendment to Articles of Organization, along with our check for \$25.00 for the filing fee. Please proceed to make the requested correction.

Thank you for your attention to this matter and should you have any questions or need anything further, feel free to contact me at 386/257-3839 x316 or e-mail me at bethrobins@riceroselaw.com.

Sincerely,



Beth J. Robins, Legal Assistant
to Matthew C. Shapiro, Esquire

/bjr
Encs.



Principal Office: 222 Seabreeze Boulevard • Daytona Beach, FL 32118 • 386.257.1222 • Fax 386.257.9025

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Southeast Volusia Office • 386.426.6463

www.RiceRoseLaw.com

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

2 Go Flooring, 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 October 26, 2015 and assigned Florida document number L15000181438.

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

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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>
	Susan McCauley	495 Carswell Avenue, Ste. 130	<input type="checkbox"/> Add
		Holly Hill, FL 32117	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated November 11, 2015

Mary Frances Sherman
Signature of a member or authorized representative of a member

Mary Frances Sherman

Typed or printed name of signee