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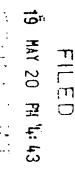
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JUN 10 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations,
SUBJECT: Youll Be Floored Flooring Experts 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:
Chad Horenziak Name of Person
Youll Be Flored Flooring ExperTS LLC Firm/Company
1300 Satillite Blud Address
CoCoq Fl 32936 City/State and Zip Code
Chadhorenziak & Yahan. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chad Hoven Zigit at (989) 780-8558 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \$\ \text{S60.00 Filing Fee.} \\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \end{Certified Copy (additional copy is enclosed)} \$\ Certified Copy (additional copy

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**

The Articles of Organization for this Limited Liability Company were filed on	rt LLC
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 absence of the 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 egistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	19 and assigned
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 absolute 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) 3. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	_
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the absence rewards 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, enteregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	
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Name of New Registered Agent: New Registered Office Address:	5
Name of New Registered Agent: New Registered Office Address:	the name of the n
New Registered Office Address:	
City	Zip Code

N

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>	Address	Type of Action
A Con	····		
			Remove
			Change
MGR	ZAK Hosner	1300 Satillete Blud Cocoa FL, 32926	Add
			Remove
			Change
			
			Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
In adding ZAK Hosher as a
manager of the company Youll Be
Floored Flooring Experts LLC.
I Chad Harenzigh, I'am the owner
of the company and the AMBR on
this Company, The Company I work
for as a sub-Contractor said to
Add Zak hosner as a officer
of the compay. If that is a
option please make nessary Change's
Thank you sincerly Chad Heregist
E. Effective date, if other than the date of filing: 5-15-2019 (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 (3xb) 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 $5 - 15 - 2019$, 2019
Chal Muenziak Signature of a member or authorized representative of a member
Chad Horenziak Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00