L19000206693

(Reque	estor's Name)
(2.1)	<u>.</u>
(Addres	ss)
(Addres	SS)
(City/St	tate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docum	nent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	ng Officer:



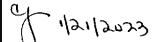
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2023 JAN 17 AMII: 10 Stand A Supplication

Office Use Only

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COVER LETTER

TO: Registration Se Division of Cor			
Vasquez Fl	ooring LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Claudia D Romero		
		Name of Person	
	Vasquez Flooring LLC		
		Firm Company	
	2817 Kiowa Ave		
		Address	
	Orange Park, FL 32065		
		City/State and Zip Code	
	claudiaromero1986@gmail		
For further information of	E-mail address: (oncerning this matter, please c	to be used for future annual report i	notification)
	oneering this matter, prease e		
Claudia D Romero		516 252-7030 at () Area Code Day	time Telephone Number
Name o	f Person	Area Code Day	time Telephone Number
Enclosed is a check for the	ne 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 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration	Section	Street Address Registration	Section
Division of C P.O. Box 632	•	Division of C The Centre o	orporations Tallahassee
Tallahassee, I	FL 32314	2415 N. Mor	iroe Street, Suite 810

Tallahassee, FL 32303



January 7, 2023

CLAUDIA D ROMERO 2817 KIOWA AVENUE ORANGE PARK, FL 32065

SUBJECT: VASQUEZ FLOORING LLC

Ref. Number: L19000206693

We have received your document for VASQUEZ FLOORING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 023A00000451

Claretha Golden Regulatory Specialist II

073 JAH 17 PM 2:00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

VASQUEZFLOORINGLLC		2023 JAN 17 AM 11: 10
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our records. Imited Liability Company)	TALLA LASSEE, FL
The Articles of Organization for this Limited Liability Con	mpany were filed on 08/14/2019	and assigned
Florida document number L19000206693		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE	<u></u>	
Pater was mailing address if applicables		
Enter new mailing address, if applicable:	-	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
Name of New Neglacied Agent.		
New Registered Office Address:	Enter Florida street address	····
	Flo	rida
	City	Zin 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 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>	Type of Action
MGR Marcus Andino	Marcus Andino	5291 Collins Road Lot 125	
		Jacksonvill, FL 32244	■Remove
			∐Remove
			Change
			∐Remove
			Change
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Remove
			Change
			\
		⊒Remove	

	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	••
	10/13/2022
Not	effective date, if other than the date of filing: (optional) 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 e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as thument's effective date on the Department of State's records.
	cord 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 sfiled.
Dat	ed 10/13/2022
	Cloude in Lineary Control of a member or authorized representative of a member
	Claudia D. Romero
	Typed or printed name of signee