## L 64000 12451

	(Requestor's Name)
ı	(Address)
	(Address)
	(
	(City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
L risk si	
	(Business Entity Name)
	(Dusiness Erany Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	MAY 1.2 2022
	MAY 1 2 2023

Office Use Only

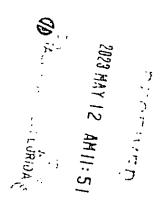


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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: WILLO	Mame of Limited Liability Co	ple Tile	LLC
The enclosed Articles of Amendment an	d fee(s) are submitted for filin	g.	
Please return all correspondence concern	ing this matter to the followin	ig:	
F	Mary Sc	mders	
<u>Mi</u>	Nender Ac	at Tax	Prop Inc
303	38 Crows	ordville !	Hwy Ste B
Cr	aw Fordvill	le FL 3	2327
	E-mail address: (to be used for full	$ax \omega acl$	<u>1001</u>
For further information concerning this	natter, please call:		
Bryan Sand Name of Person	at (Area	Daytime Teleph	one Number
Enclosed is a check for the following an	ount:		
\$\$25.00 Filing Fee	ate of Status Certific		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section	

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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OF

2023 MAY 12 AM 11: 47

William Whipple Tile SEURE LART OF GLASS
(Name of the Limited Liability Company as it now appears on our records:) (A Florida Limited Liability Company)

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records:) (1996)					
The Articles of Organization for this Limited Liability Company were filed on 6016000 and assigned						
This amendment is submitted to amend the following:	This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:					
The new name must be distinguishable and contain the words "Limited Liabil	hity 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 a agent and/or the new registered office address here:	address on our records, enter the name of the new registered					
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	. Florida					

## 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.

Cirv

Zip Code

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>	Name	Address	Type of Action
<u>AMB</u> R	Benjamin D. Whip	ple 1396 Avandale W	<b>OV</b> XAdd
		ple 1396 Avondale W Tallahossee FL32	3][Remove
			□Change
			□Remove
			□Change
			□Add
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<del>ioțe:</del> If	e date, if other than the date of filing:
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 d.
ated	5/12/2023
	of lugar Songlin Accountent
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00