

## Florida Department of State

**Division of Corporations** Public Access System

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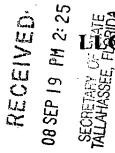
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## AMND/RESTATE/CORRECT OR M/MG RESIGN

WHOLESALE FLOORING OUTLET, LLC

Certificate of Status	0
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Help

FROM :LAZARUS 09-10-00;17:23 FAX NO. :3052201440

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3' 4

## H 0 8 0 0 0 2 1 9 0 5 7

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wholesale Flooring Outlet, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florada Limited Liability Company)

The Articles of Organization for this Limited Liability	Company were filed on 4/25/2005	and assigned
Florida document number L05000041842		- X 8
	<del></del>	19
This amandment is submitted to a medical Callegian		
This amendment is submitted to amend the following		
A. If amending name, enter the new name of the li	mited liability company here:	The state of the s
· · · · · · · · · · · · · · · · · · ·	- · · · · ·	
The new name must be distinguishable and end with the v	ords "Limited Liability Company," the des	gnation "LLC" or the abbreviation
"L.L C "		<b>5 5</b>
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:	,	
(Mailing address MAY BE A POST OFFICE BOX)		
BEHINDE WAT HE A POST OFFICE BOX		
		·
B. If amonding the registered agent and/or regi	stared office address on our records	, enter the name of the new
registered agent and/or the new registered office ad	dress here:	
•		
Name of New Registered Agent:		······································
New Registered Office Address:	•	
THE STREET OF TH	(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 uct 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 608, F.S. Or, if this document is heing filled 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)

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FROM :LAZARUS

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#

09-14-08;17:23 ;

MGRM - Managing Member

MGR = Manager

HO 8-000219057

If amending the Managers or Managing Members on our records, onter the title, name, and address of each Manager or Managing Member being added or removed from our records:

Title Name <u>Address</u> Type of Action MGRM Greene, Starahaanna 17017 aw 50th CT Add Miami\_ FL 33055 MORM Holzehuh, Dorothy 1977 NW 119th RD Add Mlami, Fl.33181 Add Remove Add Remove 🗖 Add 🖺 Remove r¶ ∧dd Remave D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 8 Signature of a member or authorized representative of a member Abento Jean Typed or printed name of signee

Page 2 of 2

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