# LOCO0034877

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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
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D. BRUCE
JAN 1 2 2012
EXAMINER

# COVER LETTER 😹 🤭

Division of C	orporations				
SUBJECT:	Alston's Flooring 8	k Home Renovations, LI	LC		
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corres	pondence concerning this matter	r to the following:			
		Pamela A. Alston			
		Name of Person			
	Alston's Flo	oring & Home Renovations	LLC		
		Firm/Company	*****	-	
		310 89th Avenue N			
		Address		•	
	St Petersburg, FL 33702				
		City/State and Zip Code		A S	
		vgreen27@gmail.com to be used for future annual report notifi	cation)	JAN -6 RETARY AHASSE	
For further information	concerning this matter, please	•	odiion)	2 A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
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Pa	mela A. Alston	at ( 727 )  Area Code & Daytime	502-7108	I: 24 STAJE LORID	
Name	of Person	Area Code & Daytime	e Telephone Number	A A	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certified	ite of Status &	osed)

**MAILING ADDRESS:** 

TO:

**Registration Section** 

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

Alston's Flooring & Home Renovations, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) March 31, 2006 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned L06000034877 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Alston's Flooring & Professional Organizing, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 310 89th Avenue N Enter new principal offices address, if applicable: St Petersburg, FL 33702 (Principal office address MUST BE A STREET ADDRESS) 310 89th Avenue N Enter new mailing address, if applicable: St Petersburg, FL 33702 (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: John Moore Floor Covering Name of New Registered Agent: 1629 Sun City Center Plaza New Registered Office Address: Enter Florida street address

### 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 608, 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.

Sun City Center

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Officer	David M. Katz	601 74th Avenue N St Petersburg, FL 33702	Add Remove
	<del>,                                    </del>		Add Remove
			Add Remove
· <del></del>	<del> </del>		Add Remove
<del></del>			AddRemove
	<del></del>		AddRemove
D. If amend	ding any other information, ent	er change(s) here: (Attach additional sheet	72 72
			JAN -6 PH I:
Dated	December 30	, 201	DA CO
	Signature of	a member or authorized representative of a men	nber
		Pamela A. Alston Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00