106000067693

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

	Registration Sec Division of Corp			
	Carbonell T	iles & Interior Design, LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	ndence concerning this matter	to the following:	
		Jose I Carbonell		
			Name of Person	
		Carbonell Tiles & Interior	Design, LLC	
			Firm/Company	
		13358 Ocean Mist Dr		
			Address	
		Jacksonville, Fl 32258		
			City/State and Zip Code	
		carbonelltile@gmail.com		
		E-mail address: (to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please ca	all:	
Jose I C			904 662-1895 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e 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 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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 Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carbonell Tiles & Interior Design, LLC						
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records. Liability Company))				
The Articles of Organization for this Limited Liability Company were filed on July 07, 2006 and assigned Florida document number Lo6000067693 and assigned						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	oility company here:					
		•				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	13358 Ocean Mist Dr					
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Fl 32258	7				
		APR :				
		5 MI				
Enter new mailing address, if applicable:	13358 Ocean Mist Dr	P 000				
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, Fl 32258	<u>မ</u> ဗိုင်္ဂ				
		<u> </u>				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new				
Name of New Registered Agent:						
New Registered Office Address:	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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and .S. Or, if this document is				

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
AMBR	Nelson De Jesus Fernandez Scott	13358 Ocean Mist Dr	
		Jacksonville, Fl 332258	▼ Remove
			☐ Change
AMBR	Juan Fernando Varela	13358 Ocean Mist Dr	™ Add
		Jacksonville, Fl 32258	□ Remove
			Change
AMBR	Santiago Carbonell	13358 Ocean Mist Dr	™ Add
		Jacksonville, Fl 32258	Remove
			☐ Change
			□ Add
		**************************************	□ Remove
			☐ Change
			Addi Remove
			PH GARRANG
			□ Change

D. 'If amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary	.)
<u> </u>	·	
	<u>. </u>	
<u> </u>		
E. Effective date, if other than the (If an effective date is listed, the date m Note: If the date inserted in this I document's effective date on the	the date of filing:	Pursuant to 605.0207 (3)(b) will not be listed as the
f the record specifies a delayed b) The 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. ocord is filed.	on the earlier of:
Dated April 20	2017	
	1-de-	17 APR
	Signature of a member or authorized representative of a member	7. 86 FE
Jose I Carbonell	•	#4 603-760
	Typed or printed name of signee	ယ္ ေျ

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Filing Fee: \$25.00