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Office Use Only



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COVER LETTER

TO: Registration Sect Division of Corpo			et at the second
SUBJECT: Eli	'S Flooring Name of Limite	ed Liability Company	3 MAY IL PAY 1: 33
The enclosed Articles of Ar	mendment and fee(s) are subt	nitted for filing.	F. 33
Please return all correspond	lence concerning this matter t	o the following:	
	aline (Castellu Cchio Name of Person	
		Firm/Company	
	5558 30	orr St. Address	
			1
	aline . cast	City/State and Zip Code -ell@live.600 be used for future annual report notification	on)
For further information con	cerning this matter, please ca		
Oline Cas	tellucchio	at (239) 321 - 4 Area Code & Daytime Te	136 Jephone Number
Enclosed is a check for the		, and some or payame re	repriorie (value)
□ \$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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

こと 選 Eli's Flooring	LLC
(A Florida Limited Liability Combar (A Florida Limited L	ny as it now appears on our records.) lability Company)
The Articles of Organization for this Limited Liability Company	
Florida document number 107 0000 306 18.	were filed on Object Add 1 and assigned
Florida document number LO (000 300 18	
Section 1997	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
VILLA D'STE Construct	tion LLC
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	5558 Bur St.
(Principal office address MUST BE A STREET ADDRESS)	5558 Burr Str Lehigh Aires FL 33971
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	The control of the co
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	SAME
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 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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:	

<u>Title</u>	<u>Name</u>	Address	Type	of Action
MGRM	Josil Sestrem	7510 Omni La. Apt 207 Fort Myes, PL 33905		Add
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Signature of a member or authorized representative of a Elesley 6: U	ember

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Filing Fee: \$25.00

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