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Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN L & S FLOORING, LLC

tificate of Status	1
tified Copy	0
ge Count	01
imated Charge	\$30.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## L & S FLOORING, LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filled on 07/12/2007 and essigned Florida document number L07000072322.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Enter new mailing address, if applicable:

B. It 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:

Name of New Registered Agent:

New Registered Office 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 statues relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions 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.

If changing Registered Agent, Signature of New Registered Agent

MGR= Manager AMBR= Authorizes Member <u>Title</u> Name <u>Address</u> Units Type of Action MGR DOUGLAS L. SACAVEM 4100 NW 13th Ave ☑ ADD Oakland, FL 33309 Page 2 of 3 C. If amending any other information, enter changes(s) here: (Attach additional sheets, if necessary.) D. Effective date, if other than the date of filling: (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of States) Signature of a member or authorized/representative of a member Luci Miranda \_\_\_Taxplace \_= REGISTERED AGENT / Attorney -in - fact Typed or printed name of signee

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized

Member being added or removed from our records: