107000091997

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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FEB 2 4 2017 S. YOUNG



COVER LETTER

TO: Registration Se Division of Cor			
Mikes Fram	ning LLC		
SUBJECT:	Name of Lim	ited Liability Company	.u
	Amendment and fee(s) are sub		
	Marcia Padgett		
		Name of Person	
	Mikes Framing LLC		
		Firm/Company	
	15390 NW 81 Ave		
		Address	
	Trenton, Florida 32693		FEB AHA
		City/State and Zip Code	23 SSEY
	mikesframingllc@bellsouth	net to be used for future annual report notific	
For further information co	e-mail address: (TO FEB 23 AH 10: 41
Marcia Padgett		352 490-7440 at ()	
Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mikes Framing		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v. Florida document number L07000091997	were filed on 02/04/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability"	ty Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		T FEB
		23
Enter new mailing address, if applicable:		3 mc
(Mailing address MAY BE A POST OFFICE BOX)		5. CORNER
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I crovided for in Chapter 605, F.S.	am familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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
MGRM	Marcia Padgett	15390 NW 81 Ave Trenton Florida	
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			□ Change
			Add
			□ Remove
			Change
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			Add
			□ Remove
			□ Change

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Effective date, if other than the date of filing:		No.		*		
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Will a Death of	February 17	2017				
Signature of a member or authorized representative of a member	·····		- -			

Page 3 of 3

Filing Fee: \$25.00