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2008 MAY -5 PM 1: 53
SECRETARY OF STATE
AND ASSECT FI ORIDA

T. CLINE MAY - 6 2008

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: CLA Hardwood Floors, LLC		
(Name of Limited Liability Company)		
	•	
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Alex Whitman		
(Name of Person)		
(Firm/Company)		
333 Bell Granch LA		
Jacksonville, FL 32259		
(City/State and Zip Code)	200 TA	
For further information concerning this matter, please call:	2008 MAY SECRET TALLAHI	1
Alex Whitmon  at (94) 338 · (387)  (Area Code & Daytime Telephone Numbe	ARY SSI	FIT
(Name of Person) (Area Code & Daytime Telephone Numbe	FST	
Enclosed is a check for the following amount:	PH 1: 53 OF STATE EE.FLORIDA	
(additional copy is enclosed) Certified	te of Status &	

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

L&A Hardu	and Hons. 11	
(Name of the Limited L (A F	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab Florida document number LD700114	pility Company were filed on 1001.	13,2001 and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the new name must be distinguishable and end with the "L.L.C."	ting Edge Crea	Hons, LLC  de designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:		scords, enter the name of the new HASSEE, FL
New Registered Office Address:	<u> </u>	inch Leffer
	Jacks on ville	orida street address) , Florida 3939
	(City)	(Zip Code)

## 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.

(If Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> ☐ Add ☐ Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member hitman Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00