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SECRETARISE FOR ARIA

B. BOSTICK
APR 1 1 2011
EXAMINER

COVER LETTER

TO:

TO:	Registration Se Division of Co			
SUBJE	ECT:			
SUBJE	<u></u>		Flooring LLC ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Michael Mullis II	
			Name of Feison	
			Mullis Flooring, LLC	
			Firm/Company	
			6212 SW 61st Street	
			Address	
		l ak	ke Butler, Florida 32054	
			City/State and Zip Code	As I
		ma	argaret1265@aol.com	
For furt	ther information o	E-mail address: (concerning this matter, please of	to be used for future annual report notification)	11 APR -8 PH
	Mi	chael Mullis	at (813) 562-233	30 7 2
		f Person	Area Code & Daytime Telephone	
Enclose	ed is a check for the	he following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	our records, <u>enter</u>	the name of the nev	
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Er	iter Florida street ad		
City	, Fiorida _	Zip Code	
	y as it now appearability Company) were filed on ity company here ed Liability Comp ce address on Ex	were filed on	

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 ameading 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:

MGR = Manager

MGRM = Managing Member Type of Action **Address** <u>Title</u> <u>Name</u> MGRM Michael Mullis Sr ✓ Add 8620 Mary Ivy Remove Plant City, Forida 33565 Rene Ruiz ✓ Add MGRM 8620 Mary Ivy Drive Remove Plant City, Fl 33565 _ Add Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) April 5 2011 Dated Signature of a member or authorized representative of a member Michael Mullis II Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00