L08000103847

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THANASER FIORISTAN

COVER LETTER

TO:	Registration Section Division of Corpo			
SUBJE	·CT·	CUSTOM TILE	E & FLOORING, LLC	
CCBUI			ted Liability Company	
		nendment and fee(s) are sub		
	RUTH ATTAWAY Name of Person			
RUTH ATTAWAY CPA				
Firm/Company				
16216 NW ASHLEY SHIVER ROAD Address				
ALTHA, FL 32421				
	City/State and Zip Code justinwikle@yahoo.com E-mail address: (to be used for future annual report notification)			
For fur	ther information con	E-mail address: (t	•	ition)
	1.	ATTAWAY		74-2995
	Name of F		Area Code & Daytime	
Enclos	ed is a check for the	following amount:		·
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 12 NOV -1 AM 10: 53

CUSTOM (Name of the Limited Liabi (A Florid	TILE & FLOORING, LLC lity Company as it now appears on or da Limited Liability Company)	TALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Florida document number L08000103867		MBER 6, 2008 and assigned
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office a		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	orida street address
	, Florida	
	City	Zip Code
New Desistered Agent's Signature if changing Desist.	arad Aganti	

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR ≒ Manager MGRM = Managing Member

Title '	<u>Name</u>	Address	Type of Action
MGR_	DAKOTAH R. SANTIAGO	6378 BLUE SPRINGS ROAD GREENWOOD, FL 32443	✓ Add Remove
			Add Remove
	· ·		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessor	
- - -			FILED 12 NOV -1" AM 10: 53 SHOWE ARE FLORE 14 LAN ASSEE, FLORE
Dated	OCTOBER 30 , 2	2012 .	
	Signature of a memb	er or authorized representative of a member	
	<i>,</i> -	JUSTIN WIKLE	
	Турс	ed or printed name of signee	

Page 2 of 2

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