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S. HAWKES

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EXAMINER

COVER LETTER

TO:	Registration Secti Division of Corpo					
SUBJ	ECT:	E.A.\$	S. TILE, LLC			
3000			ited Liability Company			
The en	nclosed Articles of Ar	mendment and fee(s) are sul	omitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
		EDWARD A. SLATTERY, JR.				
			Name of Person			
			E.A.S. TILE, LLC			
	· · · · · · · · · · · · · · · · · · ·					
561 E. COUNTRY CLUB DRIVE						
		WIL	LISTON, FL. 32696 U.S.			
	City/State and Zip Code					
		E-mail address: (to be used for future annual report notifica	tion)		
For fu	rther information con-	cerning this matter, please of	•	,		
	EDWARD A	. SLATTERY, JR.	at (352) 3 Area Code & Daytime 7	17-1585		
	Name of F	O Soli	Anda code de Bay mile	Clephone Prainter		
Enclos	sed is a check for the	following amount:				
₹ \$25	5.00 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		STREET/COURIE Registration Section	R ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	E.A.S. TILE					
(Name of	the Limited Liability Company a (A Florida Limited Liab	s it now appears	on our records.)			
	(A Florida Limited Liab	inty Company)		a .		
The Articles of Organization for this	s Limited Liability Company we	re filed on	05/28/2009	and assigned		
Florida document numberL	09000051782 .					
ent to the terminal	1.1 6.11			50 75		
This amendment is submitted to am	end the following:			1.00 F.		
A. If amending name, enter the n	ew name of the limited liability	company here:		9,7,		
,				7		
The new name must be distinguishable	and and with the "1 ! ! !	Liabilia, Cama	, » the designation (*I I C" ou the abbandation		
"L.L.C."	and end with the words "Limited	Liability Company	," the designation	"LLC" or the addreviation		
Enter new principal offices addre	ss, if applicable:					
(Principal office address MUST B)	E A STREET ADDRESS)					
	-			***		
	_	·				
Enter new mailing address, if app	licable:					
(Mailing address MAY BE A POST	<u>OFFICE BOX)</u>					
	_			.		
B. If amending the registered	gent and/or registered office	address on ou	r records, enter	the name of the new		
registered agent and/or the new re			, <u></u>			
Name of New Registered A	A cont.					
Name of New Registered A	ageiii.			 -		
New Registered Office Ad	dress:					
<u>-</u>		Enter Florida street address				
	, Florida					
		ity	, i ioi ida	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 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>Address</u> **Type of Action** <u>Name</u> EDWARD A. SLATTERY, J **MGRM** 561 E. COUNTRY CLUB DRIVE **✓** Add Remove WILLISTON, FL. 32696 U.S. 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 EDWARD A. SLATTERY, JR. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00