## L090000 64938

(F	Requestor's Name)			
(A	Address)			
· (A	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(E	Business Entity Name)			
(C	Pocument Number)			
Certified Copies	· . · Certificates of Status :			
Special Instructions to Filing Officer:				
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07/13/09--01013--006 \*\*25.00

09 JUL 13 AM 10: 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUL 1 4 2009

**EXAMINER** 

## COVER LETTER

TO:	Registration Se Division of Cor			`4		
SUBJECT:		prestigiou	is plus flooring lic			
•	-	Name of Lim	ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.			
Please 1	return all correspo	ondence concerning this matter	r to the following:			
			karen d riley		<del>-</del>	
			Name of Person			
		pre	stigiouis plus flooring llc			
			Firm/Company	ik de de e e e e e	O9 JUL 13 AM 10: 45 SECRETARY OF STATE TALLAHASSEE, FLORID	
			137 panama dr.		是四月 五	
			Address	,	LEC ASSE	
			crestview fl 32536	:		
			City/State and Zip Code		1 6 5	
		prestigi	prestigiousplusflooring@gmail.com			
		E-mail address: (	to be used for future annual report r	notification)		
For furt	her information e	concerning this matter, please of	cali:		<b>1</b> 6:	
	k	aren d riley	at ( 850 )	5851975		
	Name o	f Person		ytime Telephone Numbe	er -	
Enclose	d is a check for th	he following amount:				
<b>₽</b> \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certifie	ate 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

<u>Prestigiouis plus</u> (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears	on our records.)		
The Articles of Organization for this Limited Liability Company w	ere filed on	07/06/2009	and assigned	
9				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here	· •		
prestigious plus	flooring IIc			
The new name must be distinguishable and end with the words "Limited "L.L.C."	l Liability Compan	y," the designation "LI	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		TALL.	SE S	
Enter new mailing address, if applicable:			SSEE SEE	
(Mailing address MAY BE A POST OFFICE BOX)		200	EL STATE	
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on ou	ır records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	Fnte	r Florida street addr	000	
	City	, Florida	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, 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** ☐ Add Remove ☐ Add ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) july/10 2009 Dated Signature of a member or authorized representative of a member karen d filey Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00