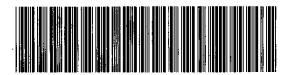
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. (Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificate:	s of Status		
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## **COVER LETTER**

TO: Registration Se Division of Cor						
SUBJECT:	Tè M Floors, LLC					
	Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are submitted for filing.					
Please return all correspo	ndence concerning this matter to the following:					
	Michelle Padgett					
	Name of Person S  TEM- FloorS, LLC					
	1370 N US Hwyl Ste. 201					
	Omond Bch. Pl 32174					
	+ mf Loors & Cf L. rr. com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
Mi Chelle Padgett at 3/2 236-8635  Name of Person  Area Code & Daytime Telephone Number						
·	, Area Code & Daytine Telephone Author					
Enclosed is a check for the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy Certified Copy					
•	(additional copy is enclosed)					

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

Tè M Floors,	LLC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number $\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$		:d		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The second secon	and an experimental section of the s			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designation "LLC" or the abbre	viation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	1370 N US Hwy 1, Ste 20 Ormand Beach, FE 3217	4		
Enter new mailing address, if applicable:	1370 N US Hwy 1, Ste 201			
(Mailing address MAY BE A POST OFFICE BOX)	Ormand Beach, FL 32174	<del></del>		
	,			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		e new		
Name of New Registered Agent:				
New Registered Office Address:				
ر پورې بېدومونيون د اود بېښور و ايموند مخدد مخواوموند	Enter Florida street address			
<del></del>	, Florida City Zip Code			
	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 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>	Name O	Address	Type of Action
MGRM	Michelle Padgett	1370 N. US Hwy 1 Ste 201 Ormona Bun, P. 32174	Add Remove
m <u>GR</u> m	Theodore B. Padgett J	Same as above	Add Remove
	<del></del>		Add Remove
			Add Remove
			Add Remove
			Add Remove
	nding any other information, enter change(s)	) here: (Attach additional sheets, if necessary.)	
_		oors of CfL. rr. com	<del>-</del>
_			<del></del>
Dated	7.13.10	·	
	My Location of a member of Michelle G. P.	authorized representative of a member  adge++	<del></del>
		printed name of signee	

Page 2 of 2

Filing Fee: \$25.00