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SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	Millennium Floo	oring Contractors, LLC		
SCHOOL		ited Liability Company		
The enclosed Articles of	`Amendment and fee(s) are sul	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:	`	
•	_	•		
		LA (111) MA	14 AUG-8 AM 10: 38	
	William B. Tetreault			
Name of Person				
	Millennium Flooring Contractors, LLC			
	*****	Firm/Company		
		4000 4 1 01		
		4208 Adams St. Address		
		Addiess		
	Но	llywood, Florida 33021		
		City/State and Zip Code		
	in	fo@2000marble.com		
		to be used for future annual report notific	ation)	
For further information of	concerning this matter, please of	call:		
Wil	liam Tetreault	at (786) 2	36-6457	
	of Person	Area Code & Daytime		
England is a short for t	ka fallawina amayati			
Enclosed is a check for t	-			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &	
	Certificate of Status	(additional copy is enclosed)	Certified Copy	
			(additional copy is enclosed)	
MAILING ADDRESS:		STREET/COURIE		
Registration Section Division of Corporations		Registration Section Division of Corpora		
P.O. B	ox 6327	Clifton Building		
Tallah	assee, FL 32314	2661 Executive Cen	ter Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Millennium Flooring Contractors, 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 C	Company were filed on	September 21, 2009	_ and assigned
Florida document numberL0900091387	<u>_</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company	<u>here</u> :	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Co	mpany," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:			····
(Principal office address MUST BE A STREET ADDI	<u></u>		
Enter new mailing address, if applicable:	<u></u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		n our records, enter the	name of the new
Name of New Registered Agent:	··		
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered	d 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	William Pellegrino	6264 SW 20th St Mirimar, Fl. 33024	✓ Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
······································			Add Remove
			AddRemove
			Add Remove
D. If amend	ling any other information, en	nter change(s) here: (Attach additional sheets, if necess	ary.)
strations			
 	August 2nd	, <u>2011</u>	
	Signature o	f a member or authorized representative of a member	
		William B Tetreault Typed or printed name of signee	
		i voca or printeo name oi signee	

Page 2 of 2

Filing Fee: \$25.00