1150/000/201

(Requestor's Name)
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(0) 10) 17 (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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G. MCLEOD

OCT 28 2010

EXAMINER



800187076068

800187076068 10/27/10--01014--003 **25.00

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10 OCT 27 PH I2: 22

SECRETARY OF STATE
ALLAHASSEE, FLORIO

COVER LETTER

TO:	Registration 8 Division of C	Section orporations					
		r-) . a	By C	hain	. lic.		
SUBJ	ЕСТ:	<u> Tiles</u>	Name of Lin	nited Liabili	y Company		
•			-				
			•				
The en	closed Articles of	of Amendmer	nt and fee(s) are s	ubmitted for	filing.		•
Please	return all corres	pondence cor	ncerning this matt	er to the foll	owing:		
		 	Edwin	<u>л А</u>	rce e of Person		
				Nam	e of Person		
		<u> </u>	-, les T	3y (hoice /Company	hh	<u>.c .</u>
		_5	40 5	luer	Cours	e C	ic.
		\mathcal{C}	CALA	PI.	344 e and Zip Code	72	·
				City/Stat	e and Zip Code	4	
			hin 26	10	ComCAS	T, ne	<u> </u>
			E-mail address	to be used for	or future annual repo	ort notification	n)
For fu	rther information	concerning	this matter, please	call:			
				at	()		
	Name	of Person			Area Code &	Daytime Tele	ephone Number
Enclos	sed is a check for	the followin	g amount:				
⊠ \$2.	5.00 Filing Fee	\$3 0.0 Cer	0 Filing Fee & tificate of Status	,Ce	00 Filing Fee & rtified Copy Iditional copy is en	[nclosed)	\$60.00 Filing Fee, Certificate of Status & 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

Tiles By C	hoice Ll	-Ç,	
(Name of the Limited Liability (A Florida	Company as it now appears (on our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on Oc	tobEK 19, 200 and assigned	
Florida document number L09000100711	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company	," the designation "LLC" or the abbreviation	on
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)	F. 6	
		\$27 \$88	
Enter new mailing address, if applicable:		Fo P III	
(Mailing address MAY BE A POST OFFICE BOX)		F.S. 7.	
inuming undress may be a rost of rice body	<u> </u>	골목 >	
	<u> </u>	<u>□:: </u>	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the name of the ne	W
togate on agent and of the new regions of the same			
Name of New Registered Agent:		and the second s	
New Registered Office Address:			
	Enter	Florida street address	
		, Florida	
	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 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:

<u>Title</u>	Name	Address	Type of Action
<u>mgr</u>	Magali Prahach	8114 S.E. 62 nd loop OCN/A Fl. 34472	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
	tober 24, 201		

Page 2 of 2

Filing Fee: \$25.00