

# L10000242774

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (713) 429-1276

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OCT 31 2008

SECRETARY OF STATE  
TALLAHASSEE  
FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
TNT CABINETRY OF NAPLES, LLC

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S. YOUNG

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DIVISION OF CORPORATIONS  
BUREAU OF CORPORATE  
INFORMATION SERVICES

H140002549683

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TNT CABINETRY OF NAPLES, 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 were filed on 04/21/2010 and assigned  
Florida document number L10000042774.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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 605, 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MARK MAGNUSSON	1201 PIPER BLVD.	<input type="checkbox"/> Add
		UNIT 9	<input checked="" type="checkbox"/> Remove
		NAPLES, FL 34110	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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14 OCT 1 2008  
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FILE

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 08/25, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
**MARK MAGNUSSON**  
\_\_\_\_\_  
Typed or printed name of signee

FILED  
14 OCT 31 PM 3:51  
SECRETARY  
TALLAHASSEE, FL 32317