L1000054260

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T. HAMPTON
JUN 1 7 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 4 U Flooring, LLC			
Name of Limited Liability Company			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Michael Reid Name of Person			
4 U Flooring LLC Jim/Company			
6720 Runnel Dr.			
New Port Richay FL 34653 City/State and Zip Code			
Sir Samalof@ Hofmail. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Michael Courey at 727 277-2166			
Name of Person / Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Name of the Limited Liability Compan	ng L., L. C.
(A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L1000054260</u> .	were filed on $\frac{5/19/2010}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabl	ity company here:
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	9 4
(Principal office address MUST BE A STREET ADDRESS)	O SM
	2 2m
	S CAR
Enter new mailing address, if applicable:	ORP (ED.
(Mailing address MAY BE A POST OFFICE BOX)	ST ST
	- - 112 1
·	- X
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here	
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 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>Address</u> **Type of Action** <u>Name</u> ☐ Add Remove MGRM Michael P. Reid Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated June Signature of a member of authorized representative of a member, Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00