## L10000061116

(Requestor's Name)					
(Address)					
(Address)					
,					
(City/Chats/Zin/Dhana #)					
(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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SECRETARY OF STATE OF CORPORATIONS

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT:	Tile Redi I	nternet Sales, LLC	,
<del> </del>	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
		Pam Kaufman	
		Name of Person	
		Tile Redi	
		Firm/Company	
	445	00 NW 126th Ave Ste	101
		Address	
	C	Coral Springs/FL 3306	5
		City/State and Zip Code	
	E-mail addresses	pam@tileredi.com (to be used for future annual rep	
For further information	concerning this matter, please		ort notification)
P	am Kaufman	at ( 954 )	323-0125 ex201
Name	of Person	. Area Code &	Daytime Telephone Number
Enclosed is a check for	the following amount:		
[ ]\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	Sectificate of Status & Certified Copy (additional copy is enclosed)

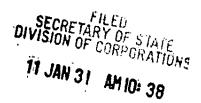
**MAILING ADDRESS:** 

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



Tile Rec	di Internet Sales, LLo	C [	
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appea a Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	06/07/2010	and assigned
Florida document number L10000061116	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :	
	Redi Sales, LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		·····	
(Principal office address MUST BE A STREET ADI	ORESS)		
•			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg	istered office address on a	our records, enter t	he name of the new
registered agent and/or the new registered office ad		our records, <u>enter t</u>	no name of the nex
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street add	ress
		, 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 of Managing Member being added or removed from our records:

MGR = Manager

	Name	Address	Type of Action
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	·		Add Remove
			Add Remove
			Add Remove
		<b>V</b> .	Add Remove
<del></del>			
If amend	ling any other information, ente	r change(s) here: (Attach additional sheets, if ne	
_			SECRETARY VISION OF C
_			RY OF STATE CORPORATIO
ated	January 27	$\frac{2011}{\sqrt{M}}$	NO TON

Page 2 of 2

Filing Fee: \$25.00