## 110000093998

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## **COVER LETTER**

Division of Corp	orations				
SUBJECT: 5'5	\$ 15 Tilers Name of Lim	LLC .			
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Daeio N', V'	Name of Person			
	<u>)5 &amp; 15</u>	Firm/Company			
	151 Park	lane		2010 AUG FO	-1
	Titusville	Address Fl. 32780		L. J	
	darie odsy E-mail address:	City/State and Zip Code  Silvs - CoH - to be used for future annual report notif	ication)	PH 2: 44 of Sime E-Florida	,
$i\lambda$ . $\Omega$	neerning this matter, please ca	lzuicka (305) 74746 Area Code Daytime	321 Telephone Number	<u>5932</u> 281	ı
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 enclosed)	Certified C	of Status &	

MAILING ADDRESS:

Registration Section

TO:

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 Compa	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000009399</u> .	were filed onO9   08   2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab  S & VS Tiles and ain had  The new name must be distinguishable and contain the words "Limited Liab	lic
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	ASSEE LORIDA
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new
Name of New Registered Agent:  New Registered Office Address:  /S/	Pack lane  Enter Florida street address
Titus	. I

## 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma $AMBR = Au$	anager uthorized Member				
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