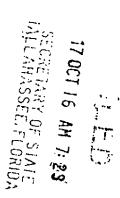
11000096322

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	



200304437802

10/17/17--01001--026 **25.00



2017 BCT 16 AM 5: 12

Office Use Only

COVER LETTER

Div	ision of Corp	porations		
SUBJECT:	Comprehen	sive Flooring Installation, LLC		
JOBULET.		Name of Limi	ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Rodney A. Jones		
			Name of Person	
		Comprehensive Handymar	and Flooring Services, LLC	
Firm/Company				
		4025 Walton Bridge Road		
			Address	
		Ponce de Leon, Florida 32-	455	
			City/State and Zip Code	
		comprehensiveflooring@gn		
		E-mail address: (t	to be used for future annual report notific	cation)
For further in	nformation co	oncerning this matter, please ca	ıll:	
Rodney A. J	ones		850 699-7691	
	Name of	Person		Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$2 5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Comprehensive Flooring Installation, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	<u>ny as it now appears on our records.)</u> Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L10000096322</u>	were filed on September 15, 2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Comprehensive Handyman and Flooring Services, LLC	
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4025 Walton Bridge Road
(Principal office address MUST BE A STREET ADDRESS)	Ponce de Leon, Florida 32455
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City Code
New Registered Agent's Signature, if changing Registered Agent:	RA 18

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	☐ Remove
		····	□ Change
			Add
			Remove
			Change
			Remove
			Change

1				
			 .	
	· · · -			
		· · · · · · · · · · · · · · · · · · ·		
				
			<u></u>	· :}} -
) [7]	.7 O
				-1-1-4-3
			υ. 	
				Q A± 1
	· -			5 12 E
				<u>> 100°</u>
ctive date, if other than the	date of filing:	. 1. 661	(optional)	\D (05
effective date is listed, the date must If the date inserted in this bloom	ock does not meet the applica			
ment's effective date on the De	partment of State's records.			
ecord specifies a delayed e 90th day after the reco		t an effective tim	e, at 12:01 a.m.	on the earlie
e sour day after the rect	na is mea.			
October 13	2017			
u		<u> </u>		
	Rodney A. Jones Rodney A. Jones (Oct 13, 2017)			
	Rodney A. Jones (Oct 13, 2017)			

Page 3 of 3

Filing Fee: \$25.00