P. 001

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALPHA BUSINESS CONSULTING, LLC

Account Number : 120080000061 Phone : (407)582-9830

: (407)294-7677

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Addross	٠

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN R&R REAL FLOORING, LLC

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COVER LETTER

ŤO:

Registration Section
Division of Corporations

R&R REAL 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:

MARIA PINHEIRO

Name of Person

ALPHA BUSINESS CONSULTING, LLC

Firm/Company

7022 CARLENE DR

Address

ORLANDO, FL 32835

City/State and Zip Code

pinheiromaria@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA PINHEIRO

,,407**、582-983**0

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 enclosed)

□\$60.00 Filing Fee,
Certificate 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

SHOW'S PARENTS

R&R REAL FLOORING, 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 Liabili	ty Company were filed on 08/29/2011	and assigned
Florida document number L11000099170	·	
This amendment is submitted to amend the following	8:-	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designs	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	ef address
	, Flori	
	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				
<u>Title</u>	Name	Address	Type of Action	
MGRM	WELDER SENA SILVA	6629 WINDER OAKS BLVD	Add	
	,	ORLANDO, FL 32819	Remove	
MGR	CLEBIO PARADELA DOS REIS	6629 WINDER OAKS BLVD	Add	
		ORLANDO, FL 32819	Remove	
	<u>. </u>		Add Remove	
	•		Add Remove	
			Add Remove	
·			Add Remove	

	nation, enter change(s) here: (Attach additional sheets, if necessary.)
CHANGE MAN	NAGER/MEMBER DETAIL
RAMON RODI	RIGUES DE MELO
TITLE: FROM	(MGR); TO (MGRM)
	·
NOVEMBER, 05	, 2013
+ Barman &	2. d. 3.10
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	gnature of a member or authorized representative of a member
RAMON ROD	RIGUES DE MELO
	Typed or printed name of signee

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