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SECRETARY OF STATE DIVISION OF CORPORATIONS

9-4-10

COVER LETTER

	Registration Section Division of Corporations	
SUBJE(T: Fx piess A florde UK FLowing LLC. Name of Limited Liability Company	
The enc	osed Articles of Amendment and fee(s) are submitted for filing.	
Please re	turn all correspondence concerning this matter to the following:	
	Dennis M. Bicyer Name of Person	
	Express Affordable Flooring Firm/Company	
	610 Devenshive. Blud Address	
	City/State and Zip Code Dennis - breyer D yahoo.com E-mail address: (to be used for fulfire ahnual report notification)	
	E-mail address: (to be used for future annual report notification)	
For furt	er information concerning this matter, please call:	
	Dennis M. Bieger at (407) 701-4009. Name of Person Area Code & Daytime Telephone Number	
Enclose	is a check for the following amount:	
\$25.	0 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$\square\$ \$\squ	ed)

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 (A Florida Limited Lia	e Floor: 14 LLC y as it now appears on our records. ability Company))	
The Articles of Organization for this Limited Liability Company vi Florida document number	were filed on $\frac{10/18}{20i}$	/ and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation	on "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		_	
(Principal office address MUST BE A STREET ADDRESS)		SECTION SECTIO	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILED STATE OF CORPORATIONS -3 PM 3: 30	
B. If amending the registered agent and/or registered office address here	· —	ter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	F. t. Fl. : J t.	4 - 11	
	enter Floriaa street	Enter Florida street address	
	City , Florid	a 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	nicholas, Sinyleton	252 Surony court	Add
		willer Springs, FL 32708	Remove
			Add
			Add SECREMARY OF COLOR
			ED STALEAGO PH 3: 30
			Remove
	- 		Add
	*	•	Remove
			Add
			Remove
			Add
			Remove

). If amending any	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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ated	
	1 h
	Signature of a member or authorized representative of a member
	Dennis Breyer. Typed or printed name of signee
\ <u></u>	Typed or printed name of signee
	Page 2 of 2

Page 3 of 3

Filing Fee: \$25.00

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