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COVER LETTER

	gistration Sec dision of Corp					
SUBJECT:	SALCEDO CARPET, LLC					
	-	Name of Limited Liability Company				
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.	ં હ		
Please return	all correspon	ndence concerning this matter	to the following:			
		CHRISTIAN SALCEDO				
			Name of Person			
		SALCEDO FLOORING.	LLC			
			Firm/Company			
		15920 GREEN COVE BL	VD			
			Address			
		CLERMONT, FL 34714				
			City/State and Zip Code	 		
		Chrisalcedo 20 @ E-mail address: (Uahoo. Com to be used for future annual report notif	lication)		
For further i	nformation co	oncerning this matter, please c	all:			
CHRISTIAN SALCEDO		321 302-0740 at ()				
Name of Person		f Person	Area Code Daytime Telephone Number			
Enclosed is	a check for th	ne 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Salcedo Carpet, 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 Liability Company were filed on 05/08/2012 _____ and assigned Florida document number 1.12000061919 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SALCEDO FLOORING, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_, Florida _

Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being adde 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
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			□Remove
			∏Change.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (optional) E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Signature of a member or authorized representative of a member CHRISTIAN SALCEDO

DW E CASA

Typed or printed name of signee