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(Address)					
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13 JAN 22 AM 10: 35 RECEIVED

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J. SAULSBERRY EXAMINER

JAN 2 2 2013

COVER LETTER

TO:	Registration Section livision of Corporations	
SUBJĘ	Name of Limited Liability Company	
The en	sed Articles of Amendment and fee(s) are submitted for filing.	
Please	urn all correspondence concerning this matter to the following:	
	Braulio E Garza Name of Person AC Floor S Firm/Company 509 Ravens View Or Address Tallahassa FL 323 10 City/State and Zip Code Panhardle 123 @ gmail E-mail address: (to be used for future annual report of otification) Triples of Panhardle 123 @ gmail Firm formation concerning this matter, please call:	
For fu	er information concerning this matter, please call:	E
\mathcal{B}	Area Code & Daytime Telephone Number	
Enclos	is a check for the following amount:	
\$2	O Filing Fee \$\ S30.00 Filing Fee &	

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

ARTICLES OF O	RGANIZATION
Ol	F S T
ACF/0076 (Name of the Limited Liability Compar	ry as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 1-22 -13 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab BE The new name must be distinguishable and end with the words "Limi" L.L.C."	Floors Installs LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	509 Ravensview Dr Tallahassee
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	ffice address on our records, enter the name of the new
Name of New Registered Agent: New Registered Office Address:	
	Enter Florida street address
·	, Florida
	City Zin 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 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 = Mai	naging Member		
<u>Title</u>	Name	Address	Type of Action
<u>PABRM</u>	Brauho Garza	509 Ravensview Dr Tallahassee FL	Add Remove
M <u>GR</u> H	Enrique Franco	Enrique Franco 509 Ravensview Dr	Add Remove
	·		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	JAN 22 AM
			
Dated	Signature of a member	or authorized representative of a member	·
	Braulio E	Garza or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00