## L12000094889

		Č
(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
·		
	_	

Office Use Only



200238199542

08/06/12--01041--009 \*\*25.00

2012 AUG -6 AM 11: 22
SECRETARY OF STATE
ALLAHASSEE FIRE

٠

J. SAULSBERRY EXAMINER

MIG 8 2012

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	DEC	ORART LLC		
	Name of Lim	ited Liability Company		
	f Amendment and fee(s) are su	-		
		Victor H Suarez		
		Name of Assort	···································	
		Firm/Company		2012 AUG - 6 AM 11: 2.2 SECRETARY OF STATE TALLAHASSEE, FLORID
5280 NE 2ND CT #1			출취 <b>같</b>	
		Address		G-6 TARN ASS
		MIAMI FL 33137		E P
	City/State and Zip Code			FLO 1
	ViC	torcontractor@live.com	cation	II: 22 TATE ORID
For further information	concerning this matter, please	·	cationy	
	ctor H Suarez	ur(	306 5433	<del></del>
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	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		of Status & Copy
	LING ADDRESS: tration Section	STREET/COURI Registration Sectio		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	DECORART LLC			
(Name of the Limit	ed Liability Company as it now appea (A Florida Limited Liability Company)	ırs on our records.)	<del></del>	
The Articles of Organization for this Limited Liability Company were filed on		07/23/2012	and assigned	
Florida document number L120000	94889			
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liability company he	re:		
The new name must be distinguishable and end v	with the words "Limited Liability Comp	pany," the designation "L	LC" or the abbi	eviation
Enter new principal offices address, if appl	licable:	- <u>- 14</u>	<del>\</del> \	
(Principal office address MUST BE A STRE	EET ADDRESS)		2012 SEC	
			AUG AHA	
			AUG -6  ORE JARY  AHASSEE	7
Enter new mailing address, if applicable:			EFO J	
(Mailing address MAY BE A POST OFFIC	F ROX)		AHII: 22 OF STATE E. FLORIDA	Ċ
Manual Company De A Post of Pres				Name of
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
B. If amending the registered agent and	d/or registered office address on	our records, enter t	he name of t	ne new
registered agent and/or the new registered	ottice address nere:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florido			
		, 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 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> <u>Name</u> **Address Type of Action** MGRM VICTOR H SUAREZ 5280 NE 2ND CT #1 ✓ Add
☐ Remove MIAMI\_FL 33137 ☐ Add Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 31 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member

Page 2 of 2

Victor H Suarez
Typed or printed name of signee

Filing Fee: \$25.00