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COVER LETTER

	Registration Se Division of Cor			
CHD IEC	Naples Floc	oring Company, LLC		
SUBJEC	1:	Name of Lim	ited Liability Company	
The enclo	sed Articles of ,	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Todd B. Allen, Esq.		
			Name of Person	
		Lindsay & Allen, PLLC		
			Firm/Company	 _
		13180 Livingston Road, S	uite 206	
			Address	
		Naples, FL 34109		
			City/State and Zip Code	
		Todd@naples.law		
		E-mail address: (to be used for future annual report notif	ication)
For further	r information co	oncerning this matter, please c	all:	
Todd B.	Allen, Esq.		239 593-7900 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
≡ \$25. 0	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 Addres Registration S		Street Address: Registration Sec	ction
I	Division of C	orporations	Division of Corp	porations
	P.O. Box 632		The Centre of Ta	
	Fallahassee. I	*L 32314	Z410 in. Monroc	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2028 NOY 25 PH 5: 35

NAPLES FLOORING COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company), 12 32 5

(A Florida	Limited Liability Company)	ika. rt
The Articles of Organization for this Limited Liability Co Florida document number 1.13000010691		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>-</u>
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	l office address on our records, <u>en</u>	ter the name of the new registered
New Registered Office Address:	Enter Florida street ad	!dress
		Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered	i Agent:	
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and coacept the obligations of my position as registered agbeing filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of my duties zent as provided for in Chapter 60	s, and I am familiar with and 95, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member



<u>Title</u>	<u>Name</u>	Address	2020 HOY 25 PM 5: 35	Type of Action
MGR	LAURIE A. LONGO	2175 Shad Court	SECTION AND CONTRACT OF THE SE	Ξ _ □Add
		Naples, FL 34102		_ □Remove
				_ ≡ Change
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11/23/20		
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date: If the date inserted in this block does not meet the applicable iment's effective date on the Department of State's records.	ite of filing or more than 90 days at	otional) fler filing.) Persuant to 605.0207 this date will not be listed as
ord specifies a delayed effective date, but not an effective time, filed.	at 12:01 a.m. on the earlier of:	(b) The 90th day after the
November 23 20207		

Filing Fee: \$25.00

Typed or printed name of signee