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COVER LETTER

TO:

Registration Section **Division of Corporations**

OORING EXRESS OF JACKSONVILLE

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN L EDMONDS SR

Name of Person

FLOORING EXPRESS OF JACKSONVILLE

Firm/Company

6139 103RD STREET

Address

JACKSONVILLE FL 32210

City/State and Zip Code

sledmonds@live.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN L. EDMONDS SR. at (904) 424

Name of Person

Enclosed is a check for the 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/COURIER ADDRESS:

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



April 18, 2013

YTEPHEN L. EDMONDS SR 6139 103RD STREET JACKSONVILLE, FL 32210

SUBJECT: FLOORING EXPRESS OF JACKSONVILLE LLC

Ref. Number: L13000016984

We have received your document for FLOORING EXPRESS OF JACKSONVILLE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 313A00008964

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLOORING EXPRESS OF JACKSONVILLE

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

(A Florida Limited Li	ability Company)		
The Articles of Organization for this Limited Liability Company vi Florida document number L13000016984	were filed on FEB. 2013	and assig	gned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and end with the words "Limits "L.L.C."	ed Liability Company," the designation "LL	C" or the ab	breviation
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 offi	ice address on our records anter the	a nama of	the new
registered agent and/or the new registered office address here		name or	the new
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:		>>> <	Marian.
_	Enter Florida street addre	ss <u> </u>	
	, Florida	<u> </u>	177
	City	Zip Code	Samuel .
New Registered Agent's Signature, if changing Registered Agent:	F OX	制 二	
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I further agre	e to comply	y with

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, 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	RICHARD PAUL HAZOUORI JR.	6139 103RD STREET JACKSONVILLE, FL 3221	0 🗸 Add
			Remove
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. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ated	807 EL
	Signature of a member or authorized representative of a member
	STEPHEN L. EDMONDS SR.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00