

L13000061820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

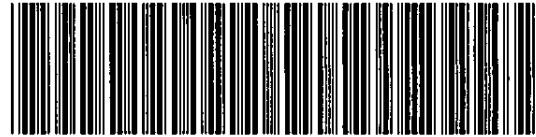
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 11 2013

T. HANCOCK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NTR Flooring LLC

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:

Juan J. Tabares-Pineda

Name of Person

NTR Flooring LLC

Firm/Company

18092 Constitution Cir

Address

Fort Myers, FL 33967

City/State and Zip Code

ntrflooring@gmail.com

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

For further information concerning this matter, please call:

Juan J. Tabares-Pineda

Name of Person

at **(239) 603-3496**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NTR Flooring 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 April 29, 2013 and assigned
Florida document number L13000061820

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" 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: Juan J. Tabares-Pineda

New Registered Office Address: 18092 constitution cir

Enter Florida street address

fort myers, Florida 33967

City

Zip 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 attending 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	JuanTabares	18092 constitution cir	<input type="checkbox"/> Add
		fort myers, FL 33967	<input checked="" type="checkbox"/> Remove
MGRM	Juan J. Tabares-Pineda	18092 constitution cir	<input checked="" type="checkbox"/> Add
		Fort myers, FL 33967	<input type="checkbox"/> Remove
MGRM	Samuel David Tabares Pineda	18092 constitutioncir	<input checked="" type="checkbox"/> Add
		fort myers, fl 33967	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 8th, 2013.



Signature of a member or authorized representative of a member

Juan J. Tabares-Pineda

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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