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COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT:	tez Flooring &	Renovations LLC ited Liability Company		
	Name of Lim	ited Liability Company		
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	are contenting this matter	to the following.		
	Nestor	A. Cortez Name of Person		
		Name of Person		
	Cort	Firm/Company & Renow	utions 216	
		гит/ С опрану		
	2775 Woodland	d Creek 2007		
		Address		
	Kissi m	nre 61.34744		
	7(133.7.7.	City/State and Zip Code		
	cortez m	city/State and Zip Code	7 7.	
	E-mail address: (to be used for future annual report notifi	cation)	
For further information co	ncerning this matter, please ca	all:	-	
	-			
Nestor	A. Cartez	at (407) 709-	5804	
Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	following amount:			
	•	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
(MAIL II	NG ADDRESS:	STDEET/COUDIN	TD ADDDESS.	
Registra	tion Section	STREET/COURIE Registration Section	1	
Division P.O. Bo	of Corporations	Division of Corpora Clifton Building	itions	
	see, FL 32314	2661 Executive Cer	iter Circle	

Tallahassee, FL 32301

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	(optional)	U.A	
ī	or more than	(optional) or more than 90 days after filing.) illing requirements, this date w	LAHASSEE, F

Page 3 of 3

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

' CORTEZ FLOORING S		LLC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company)	.)
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
NA		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NIA	
(Principal office address MUST BE A STREET ADDRESS)		16
		AHÊ V O
		SSS
Enter new mailing address, if applicable:	NJA	7 7
(Mailing address MAY BE A POST OFFICE BOX)	1-11-11	5. S.
B. If amending the registered agent and/or registered o	ffice address on our records,	Þ
registered agent and/or the new registered office address her		
Name of New Registered Agent:	NIA	
New Registered Office Address:	N/A	
	Enter Florida street address	
	, Flor	rida Zip Code
	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 605, 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 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

	Title	Name	Address	Type of Action
muj	MG R	Nelson A. Catez	8981 Lee Vista Blud Apt. 2202 Orlando FL. 32829	_ K Add
	111012			□ Remove
				Change
				□ Add
				Remove
				Change
				□ Add
				□ Remove
			A C	Change
			ASSE	C Change
			FLORIDA	□ Remove
				Change
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