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-DIVISION OF CORPORATIONS

'JUL' 2 2013 T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

FLOOR DESIGNS BY JASON LLC

SUBJECT:

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:

WINSTON PINEDA

Name of Person

FLOOR DESIGNS BY JASON

Firm/Company

11249 SW 14TH LANE #1109

Address

MIAMI, FL 33184

City/State and Zip Code

OFFICEMATICA@COMCAST.NET

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

For further information concerning this matter, please call:

WINSTON PINEDA

,786<u>,</u>985-7790

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

□\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLOOR DESIGNS BY JASON 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 Liab	oility Company were filed on 06/22/2013	and assigned
Florida document number L13000090172		SEC DIVISH
This amendment is submitted to amend the follow	ving:	SE S
A. If amending name, enter the new name of the	he limited liability company here:	- PH
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	0X)	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter the</u> ce address here:	name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	SS
	, Florida	
	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 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
MGR	LUIS PAREDES	11249 SW 14th LANE #1109 MIAMI, FL 33184	Add
			Remove
			Add
			Remove
			OINTE STARTED
			PH 1:5
			\Box
			Remove
<u> </u>			Add
	·		Remove
			Add
			Remove

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	6/26/13
	+ (Wine fourt
	Signal re of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

DIVISION OF CORPORATION