#113000096489

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	е)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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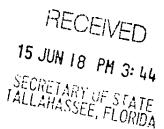
06/08/15--01012--004 **25.00



K.SALY EXAMINER JUN 1 8 2015



FLORIDA DEPARTMENT OF STATE Division of Corporations



June 9, 2015

EDDIE JENKINS FLOORING LLC EDDIE JENKINS 12904 FIRST ISLE HUDSON, FL 34667

SUBJECT: EDDIE JENKINS FLOORING LLC

Ref. Number: L13000096489

We have received your document for EDDIE JENKINS FLOORING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 515A00012102

COVER LETTER

Division of Corporations
SUBJECT: Eddie Jenkins 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:
Eddie Jenkins Floring LLC
Pirnt/Company
12904 First ISLE
Hudson Fl. 346627 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Eddie Jenkins at (727) 226-9943 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$\$ Certificate of Status \$\Bigcup \text{Certified Copy (additional copy is enclosed)}\$\$\$\$\$\$\$ 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

FILED
2015 JUN 18 PM 5:07

				18 PM 5:07
EDDIE JENK (Name of the Limited	Liability Company as it no	NG LLC w appears on our recor	TALLAHAS ds.)	RY OF STATE
				- LOWID,
The Articles of Organization for this Limited Liab Florida document number #1.13000096	oility Company were file $\mathcal{U}\mathcal{G}$	d on 7/8/	2013	and assigned
Florida document intimber	<u> </u>			
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liability com	pany here:		
The new name must be distinguishable and contain the work	ds "Limited Liability Compa	ny," the designation "LL	C" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO				
Training manress MITT DBTT 1 051 01 11 et De			-	
B. If amending the registered agent and/or registered agent and/or the new registered office		ress on our record	ls, <u>enter the</u>	name of the new
Name of New Registered Agent:	Eddie	Jenkin:	5	
New Registered Office Address:	12904 F	irst Is Enter Florida street addre	;LE	
	Hudson	F	iorida	3.4 lele 7 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.

f 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 = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Eddie Jenkins	12904 First Isle	□ Add
		Hudson FL. 34667	7□ Remove
			Change
MGR	CAROlyn Jenkins	12904 First Isla Hudson Fl. 341di	2 □ Add
	·	Hudson Fl. 341di	□ Remove
			Change
			Add
			Remove
			Change
			Cháptee
			Remove
			Change
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			□ Remove
			Changa

		
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	be prior to date of filing or more than 90 days after filing.) Pursuant applicable statutory filing requirements, this date will not be	
e record specifies a delayed effective date, b The 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the ϵ	earlier (
ated Jerne 3. 20	<u>)15</u> .	
Eddie Jank	or authorized representative of a member	
Sanatura of mumber	se authorized raprocentative of a member	

Page 3 of 3

Filing Fee: \$25.00