Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC

Account Number : 120140000083 Phone : (407)932-0040 Fax Number : (407)520-5473

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: BENITOLOGE CAR (CLOVO, LONG.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AD FLOORING AND REMODELING, LLC

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Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Se Division of Cor						
SUBJ		RING AND REMODELING L	rc				
		Name of Lim	ited Liability Company				
The or	aalogad Artiglas of	Amondment and fac(c) are pub	mitted for filing				
		Amendment and fee(s) are sub	-				
Please	return all correspo	ndence concerning this matter	to the following:				
		BENTTO LOPEZ					
			Name of Person		-		
		AD FLOORING AND RE	MODELING LLC				
			Firm/Company		-	20	
		5127 BISCAYNE RD				2019 JUH -	
			Address		- ; <u>;</u> ;;; -	711 	$\frac{m}{2}$
		KISSIMMEE, FL 34746				م در اس	
		BENITOLOPEZ64@ICLO	City/State and Zip Code IJD.COM				
		E-mail address: (to be used for future annual report notific	cation)	* • •	သ	
For fu	rther information c	oncoming this matter, please c	nll:				
BENI	TO LOPEZ		407 715-1566				
	Name o	「Person	at () Area Code Daytime	Telephone Numba	r		
Resto	eed is a chack for th	ne following amount:					
	25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 F	iling Fee		
	25.00 Fitting Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certifica Certifica	ate of Sta	itus &	

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, PL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company we Florida document number £13000159793		and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabilit</u>	y company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2019
(Principal office address MUST BE A STREET ADDRESS)		JUN -7
Euter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered offic registered ugent and/or the new registered office address here:	e address on our records, <u>ent</u>	er the name of th
Name of New Registered Agent:		····
New Registered Office Address:		
	Enter Florida street address	
	. Florida	

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

It 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LOPEZ, OSCAR	5127 BISCAYNE RD KISSIMMEE, FL 34746	
		ACCONTACTORIAL TO DAY TO	Add
			☐ Remove
			☐ Change
MGRM	Lopez, Benito	5127 BISCAYNE RD KISSIMMEE, FL 34746	
			☐ Remove
			☐ Change
			Add E
			Remove
		M. M	Enchange
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). It amending any other informati	on, enter change(s) here: (Attach a	additional sheets, if necessary.)	
			
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E. Effective date, if other than the d	late of filing: be specific and cannot be prior to date of liti	(optional)	665 0207
	ck does not meet the applicable statutor		
If the record specifies a delayed (b) The 90th day after the reco	effective date, but not an effec rd is filed.	tive time, at 12:01 a.m. on th	e earlier of
Dated	2019		
	Benito lope?		
-	ignature of a member or authorized representation	native of a member	
BENITO LOPEZ			
	Typed or printed name of si	enee	- .

Page 3 of 3

Filing Fee: \$25.00

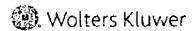
FAX COVER SHEET

ТО	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2019-06-06 16:12:32 CST
RE	Signpost Homes, Inc.

COVER MESSAGE

Tori Wolfe
Associate Fulfillment Specialist
Fulfillment Operations
CT Corporation

Team (614) 280-3338
GlobaiFulfillmentTeam@wolterskluwer.com



4400 Easton Commons Way Suite 125 Columbus, Ohio 43219 www.wolterskluwer.com

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