L14000031499

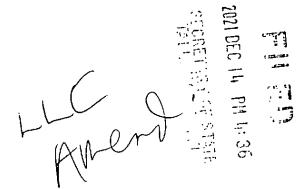
(Req	uestor's Name)	
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Office Use Only



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2021 MON 15 FM 84 16

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 11, 2021

JOAO B OLIVEIRA COSTA 9165 S.W. 18TH ST BOCA RATON, FL 33428

SUBJECT: JDC FLOORING LLC Ref. Number: L14000031499

We have received your document for JDC FLOORING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Summer Chatham OPS

Letter Number: 521A00019036

1 TALKED TO
PITA

11-8-21

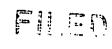
COVER LETTER

	ion Section If Corporations		
SUBJECT:	JDC FL	LOORING LLC	<u>.</u> .
	Name of Limit	ed Liability Company	
	les of Amendment and fee(s) are subm		
Please return all co	rrespondence concerning this matter to	o the following:	
	JO40	B. OLIVEIRA Name of Person	COSTA
	JD	C FLOORING Firm/Company	5 LLC
	Boca	SW 18# S7 Address RATON FC City/State and Zip Code	33 <i>428</i>
		City/State and Zip Code	
	E-mail address: (to	be used for future annual report notifi	eation)
For further informa	ation concerning this matter, please cal	l:	
	o OLIVEIRA	at (<u>56/</u>) <u>305</u> . Area Code Daytime	206 4 Telephone Number
Enclosed is a check	c for the following amount:		
25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status 1 PAIO	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
•	tion Section of Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	oorations

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 DEC 14 PH 4: 36

VDC FLOOR	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w	were filed on $02-24-14$ and assigned
Florida document number <u>4/40003/499</u> .	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty 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:	
(Principal office address MUST BE A STREET ADDRESS)	CI JA
	1
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N K
B. If amending the registered agent and/or registered office ad	
agent and/or the new registered office address here:	/ enter the name of the new registered
	r 1 1
Name of New Registered Agent:	N 7
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	N/A
I hereby accept the appointment as registered agent and agree	to act in this capacity. I further agree to comply with the

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 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
MGR	ANTONIO R. SOYER	460 LOCK DR 162 DEERF	ELD BEN Add
			Remove
			☐ Change
	· 		□Add
		 	□Remove
			Change
			\ \ _Add
			□Remove
			☐ Change
			DAdd
			Remove
			. Change
			□Add
			Remove
			. Change
			□Add
			Remove
			Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an effe ote:	ve date, if other than the date of filing:
record is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated .	Signature of a member or authorized representative of a member
	That is the
	Signature of a member or authorized representative of a member
	JOAO COSTA

Filing Fee: \$25.00