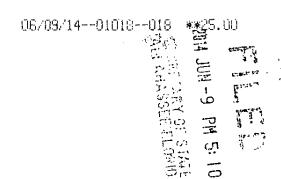
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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JUN 11 2018 D. BRUCE

COVER LETTER

TO: Registration Secti Division of Corpo						
SUBJECT:	Lotus Floc	oring LLC				
	Name of Limi	ited Liability Company				
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.				
Please return all correspond	ence concerning this matter	to the following:				
	Dies	Name of Person				
		Name of Person				
	_ Lotus ?	Flooring LLC				
		Firm/Company				
	19380 60	Mins Ave Apt 19	522			
		Address				
	Sunny Isla	en Fl 33160				
	dbafloor	City/State and Zip Code Tins @ Gymanl. com to be used for future annual report notifica				
•	E-mail address: (t	to be used for future annual report notifica	tion)	300	200 200 200 200 200	
For further information cond	cerning this matter, please ca	ıll:		3.4	- NOF SE	THE PERSON NAMED IN
Dieso	Bedoza	at (<u>954</u>) 274799 Area Code Daytime To	72	14.82 16.82 16.82	N - 9	MALIE.
		Area Code Daytime To	elephone Number	TOF STATE	PH 5: 10	THE PARTY OF THE P
Enclosed is a check for the	_			1967) -	0	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sertificate Certified C (additional co	of Status Copy		

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

Lotus FI	ooring LLC
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	
This amendment is submitted to amend the following	y;
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and end with 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 AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
	The state of the s
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	<u> </u>
	Enter Florida street address
	, Florida 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Type of Action Title** Name <u>Address</u> Diego Bedora 19380 Collins Ave Apt 1522 MGR □ Add Sunny isles FL 33160 ☐ Remove Edgar A Navia Narvaez 19380 Collins Ave Apt 1522 MGR hbA Mi Sunny IslesFL 33160 ☐ Remove Juan Carlos Sanchez Cardona 19380 Collins Ave Apt 1522 MGR Sunny Isles FL 33160 ☐ Remove ☐ Remove □ Add ☐ Remove

,	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
	
Effective (The effective the date the	date, if other than the date of filing:
Dated	June 03 2014
	And the fat
	Signature of a member or authorized representative of a member D. 140 Bedoya

Page 3 of 3

Filing Fee: \$25.00

