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D. IVERTE ALS S. CLI

COVER LETTER

TO: Registration S Division of Co						
Brandon	s Flooring					
SUBJECT:Name of Limited Liability Company						
The enclosed Articles o	of Amendment and fee(s) are sul	omitted for filing.				
Please return all corresp	condence concerning this matter	to the following:				
	Brandon Essig					
		Name of Person				
		Firm/Company				
	5923 Kendrew Dr					
	Port Orange FI 32127	Address				
	bessig@ymail.com	City/State and Zip Code				
	E-mail address:	to be used for future annual report notif	ication)			
For further information	concerning this matter, please of	all:				
Brandon Essig		386 562-5148				
Name	of Person	at () 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)			
<u>Mailing Addre</u>	<u>::85:</u>	Street Address:				

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020." 17 " A: NL Brandons Flooring 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 Liability Company were filed on _______ ____ and assigned Florida document number _____ L14000086616 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Volusia Renovations LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□Add
			□Remove
			□Change
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July 16	20	020				
July 16	,					
ated	20 Signature of a memba		representative of	a member		•