(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·		
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

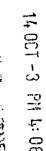
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OCT - 3 2014

T. BROWN

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Elements Tile and Stone 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:

Rodney L. Canterbury

Name of Person

Elements Tile and Stone LLC

Firm/Company

4909 annette dr.

Address

Tallahassee, Fl. 32303

City/State and Zip Code

rcanterbury@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rodney L. Canterbury

ູເ850 , 509-

Name of Person

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)

**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

Elements Tile and Stone LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	1.1.45.0044	A Comment of the Comm
The Articles of Organization for this Limited Liability Com-	npany were filed on July 15, 2014	and assigned
Florida document number L14000111806		<i>474</i>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and end with the words "Limite	ed Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 **Address** Type of Action <u>Title</u> <u>Name</u> 4909 annette dr. **AMBR** Rodney L. Canterbury Add Tallahassee, Fl. 32303 ☐ Remove □ Add ☐ Remove ☐ Remove □ Add \_□ Remove \_ 🗆 Add \_□ Add ☐ Remove

E. Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to determine the control of the effective date of the control of	ng:	(optional)
the date this document is filed by the Florida Denartm	date of receipt or filed date and cannot be more that ent of State)	n 90 days after
Dated October 02.	2014	
Dated	· · · · · · · · · · · · · · · · · · ·	
10 /2/2		
Signature of a	a member or authorized representative of a memb	er
Coy B. Lefeavers		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00