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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Brodie's Laminate & Wood Flooring. 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:
Tames Brodie Name of Person
Brodie's Laminate & Wood Flooring Firm/Company
11211 Colony Hill Dr. Address
Seffner FL 33584 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tames Brodie at (813) 598-0122  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Status Solution Solution Status Solution Solution Status Solution So

## 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

Brodie's Laminate	¿ & Wood Flooring, L.L.C
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com	pany were filed on 7-28-14 and signed
Florida document number 114000118480.	19 22 F
This amendment is submitted to amend the following:	I liability Company "the designation "I.I.C" or the abbreviation "I.I.C"
A. If amending name, enter the new name of the limited	l liability company here:
49	
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:	11211 Colony Hill Dr.
(Principal office address MUST BE A STREET ADDRES	- · ·
Enter new mailing address, if applicable:	Same as above
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered	ed office address on our records, enter the name of the new
registered agent and/or the new registered office address	
Name of New Registered Agent: Tar	mes M. Brodie
New Registered Office Address: 1121	Colony Hill Dr.  Enter Florida street address
Seff	Foer Florida 33584
	Cay 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Lynda White	102 Arcadia Ave	🗅 Add
		Spring Hill, FL 34606	Remove
			🗖 Add
			Remove
			Change
			□ Add
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(If an e	effective date, if other than the date of filing:  (optional)  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
docu	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
the re	
the report of the	e 90th day after the record is filed.

Page 3 of 3

Filing Fee: \$25.00