L15000027211

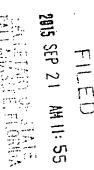
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(В	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:	Registration Sec Division of Corp			¥.
SUBJE		ORING, LLC		
			ited Liability Company	
		,		
The end	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		KAREN NUNEZ		
			Name of Person	
		DGL FLOORING, LLC		
			Firm/Company	
		6863 HAMPSHIRE BLVD)	
			Address	
		LAKELAND, FL 33813		
			City/State and Zip Code	
		KNUNEZ34@GMAIL.COI		
			to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	all:	
KARE	N NUNEZ		863 430-7929 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$25	5.00 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

FILED 2015 SEP 21 AN II: 55

SEORETAN) OT STATE FALLAHASSFE, FLORIDA

DGL Servics, LLC

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

, , ,	vere filed on 02/12/2015	and assigned
Florida document number L15000027211		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	•
DGL FLOORING, LLC	•	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6863 HAMPSHIRE BLVD	
(Principal office address MUST BE A STREET ADDRESS)		
	<u>. </u>	
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 here:		r the name of the new
Name of New Registered Agent:		
registered agent and/or the new registered office address here:		
Name of New Registered Agent:	Enter Florida street address	
Name of New Registered Agent:		
Name of New Registered Agent:	Enter Florida street address	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			Add
			Remove
			□ Change
			D Add
			Remove
			☐ Change
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			Remove
			□ Change

 			
			
			
			
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			CJ
(If an effective date is listed, the date must	ck does not meet the applicable statutor	(optional) ng or more than 90 days after filing.) Pursuant to 605.020' ry filing requirements, this date will not be listed as	7 (3)(b) s the
f the record specifies a delayed b) The 90th day after the reco		tive time, at 12:01 a.m. on the earlier o	of:
Dated September 16	2015		
	A wear of a nember or authorized represe		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00