## L15000029155

(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

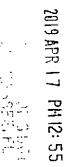
Office Use Only

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C. GOLDEN APR 1 8 2019

## COVER LETTER

Subject: CentralFlorida Flooring 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:    Joey Fernandes	
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:	
Please return all correspondence concerning this matter to the following:  Joey Fernandes  Name of Person  Central Florida Flooring LLC  Firm/Company  1579 Barfield rd	
Please return all correspondence concerning this matter to the following:  Joey Fernandes  Name of Person  Central Florida Flooring LLC  Firm/Company  1579 Barfield rd	
Joey Fernandes  Name of Person  Central Florida Flooring LLC  Firm/Company  1579 Barfield rd	
Central Florida Flooring LLC Firm/Company  1579 Barfield rd	
1579 Barfield rd	
1579 Barfield rd	
Polly City Fl. 33868	
Polk City Fl. 33868  City/State and Zip Code  Trinitie Renovation Services@9mail.cor  E-mail address: (to be used for future annual report notification)	Υ
For further information concerning this matter, please call:	
JORY FRANCES at 863 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	RECEIVED
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301  STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32301	<u></u>

RFCEIVED
APR 1 6 2019



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2019

JOEY FERNANDES 1579 BARFIELD ROAD POLK CITY, FL 33868

SUBJECT: CENTRAL FLORIDA FLOORING LLC

Ref. Number: L15000029155

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The entity's date of incorporation/organization must be listed in the document.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 819A00006343

www.sunbiz.org

Division of Comparations D.O. DOV 6997 M. H. J. B. C. L. 6994

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED

2019 APR 17 PH 12:55

Central HorldA HOO	ring LLC
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)  Lilling Company)
The Articles of Organization for this Limited Liability Company w	ere filed on 2 26 18 and assigned
Florida document number <u>L1500</u> 0029155	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability  Trin It ie Renovation Service	es LLC
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	1579 Barfield ra
(Principal office address MUST BE A STREET ADDRESS)	POIN CITY F1. 33868
7	<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 registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
\	
Name of New Registered Agent: JORY	Fernandes
New Registered Office Address: 1579	Barfield rd 🖺
Pall	Enter Florida street address
_ 10115	C17  Florida  \(\frac{\infty}{\infty}\) 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

	Authorized Person(s) authorized to ma rom our records:	nage, <u>enter</u>	the title, name, and address of ea	ch person being add
MGR = Ma AMBR = Au	nager thorized Member			
<u>Title</u>	Name	Address		Type of Action
MGR	Joey Fernandes	1579	Berfield rd Pollso	ity & Add 33868
				Remove
				Change
				Add
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Effect	tive date, if ot	her than the da	te of filing	•			(opt	ional)
If an ef Note:	Tective date is list  If the date inse	ed, the date must be	specific and does not m	cannot be price eet the appli	cable statuto	ing or more th rry filing req	an 90 days afte	r filing.) Pursuant to 605.0207 is date will not be listed as
		s a delayed e fter the record		ate, but n	ot an effe	ctive time	, at 12:01	a.m. on the earlier of
Dated	Apri	14		2019	1			
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Page 3 of 3

Filing Fee: \$25.00