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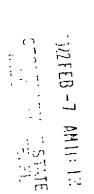
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## **COVER LETTER**

TO: Registration S Division of Co						
MLS Mar	ble & Tile LLC		e e			
SUBJECT:  Name of Limited Liability Company						
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matter	r to the following:				
	Andrey Shumakov					
		Name of Person	· · · · · · · · · · · · · · · · · · ·			
	MLS Marble & Tile LLC					
		Firm/Company				
	257 SW 5th St					
		Address				
	Boca Raton, FL 33432					
		City/State and Zip Code	<del>,</del>			
	tshumakov@yahoo.com					
For further information	E-mail address: concerning this matter, please o	to be used for future annual report no all:	tification)			
Andrey Shumakov		216 773-1188				
Name o	of Person		me Telephone Number			
Enclosed is a check for t	he 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		Street Address:	antina			
Division of C		Registration Section Division of Corporations				
P.O. Box 632		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MLS Marble & Tile 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 assigned Florida document number Liso00067411

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Torn Sole Builders LLC

The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.C."

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:

## New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
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			[] Change
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record specifies a delayed effecti	ve date, but not an effective tir	ne, at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
l is filed.			
January 31et	2022		
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	( O1 )		
~~~~ <u>~</u>	Signature of a member or author	rized representative of a member	
		representative of a member	
Andrey Shumakov			
<del> </del>	Typed or printe	d name of signee	