

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mary-n-Jamie's Step By Step Flooring-n-Cleaning, 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:

Jamie Mallett
Name of Person

Mary-n-Jamie's Step By Step Flooring-n-Cleaning, LLC
Firm/Company

8591 N.E 113th Ave
Address

Bronson, Florida 32621
City/State and Zip Code

jamie.mallett@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jamie Mallett at 352 246-8504
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**

Mary-n-Jamie's Step By Step Flooring-n-Cleaning, LLC

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

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2016 APR 19 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/17/2015 and assigned Florida document number L15000067871.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Jamie Mallett

950 S.W Gwendolen Terrace

Port Saint Lucie, Florida 32954

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Jamie Mallett

950 S.W Gwendolen Terrace

Port Saint Lucie, Florida 32954

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:

Name of New Registered Agent:

Damian Mallett

New Registered Office Address:

950 S.W Gwendolen Terrace

Enter Florida street address

Port Saint Lucie

City

, Florida 32954

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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jamie Mallett	950 S.W Gwendolen Terrace	<input type="checkbox"/> Add
		Port Saint Lucie, Florida 32954	<input type="checkbox"/> Remove
		352-246-8504	<input checked="" type="checkbox"/> Change
MGR	Mary Medley	950 S.W Gwendolen Terrace	<input type="checkbox"/> Add
		Port Saint Lucie, Florida 32954	<input type="checkbox"/> Remove
		352-519-7254	<input checked="" type="checkbox"/> Change
AMBR	Damian Mallett	950 S.W Gwendolen Terrace	<input checked="" type="checkbox"/> Add
		Port Saint Lucie, Florida 32954	<input type="checkbox"/> Remove
		352-256-5330	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

we need our address changed from 8591 NE 113th Ave Bronson, Florida 32621 to 950 S.W Gwendolen Terrace Po

we also need to change Jamie Mallett and Mary Medley from RA to MGR. and to add Damian Mallett on as the R

Multiple horizontal lines for additional information.

2015 APR 19 PM 3:06
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FLORIDA
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E. Effective date, if other than the date of filing: _____ (optional)

(If an 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated _____, _____.

Signature of a member or authorized representative of a member

Damian Mallett

Typed or printed name of signee