15000	75/86
(Requestor's Name) (Address)	700299414437
(Address) (City/State/Zip/Phone #)	ມີວີ∕ີວິນ/17ຕານີ1ນີວິທີຕາມີມຣິ ຈະຊີວີ,ນີນ
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	2017 JUN 20 PM
Special Instructions to Filing Officer:	
Office Use Only	um 21 2017 J. HARRIS

COVER LETTER

	egistration Section ' ivision of Corporations
SUBJECT	: <u>Concept Tile & Remodeling LLC</u> Name of Limited Liability Company
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Jorge T. Martinez
	Concept Tile, LLC Firm/Company
	21180 SW 187th Ane. Address
	Miami, FL 33187 City/State and Zip Code
	<u>Concept tile remodeling @qmail.con</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

tivez_____at (305) 930 - 4888 Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

X \$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECE

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June 2, 2017

JORGE I MARTINEZ 21180 SW 187TH AVE MIAMI, FL 33187

SUBJECT: CONCEPT TILE & REMODELING LLC Ref. Number: L15000075186

We have received your document for CONCEPT TILE & REMODELING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LC". The following suffixes are no longer acceptable: "Limited Company," "LC.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P93000004468.

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) 245-6051.

Jenna D Harris Regulatory Specialist II	Letter Number: 817A00011154	
Per our Attached	Conversation on 6/13/2017. Jease find sighed Letter ization. Thank you,	
of autho	www.sunbiz.org Jami Martinez s - P.O. BOX 6327 - Tallahassee, Florida 32314 For Martinez	
	www.sunbiz.org	
Division of Corporatio	s - P.O. BOX 6327 -Tallahassee, Florida 32314 🔨 👘 🔨 🖓 🖓	_

Concept Tile Corporation

214 Hibiscus Ave. Key Largo, FL 33037 Ph: (786) 255-0706

6/13/2017

To whom it may concern:

L Patrocinio Martinez, owner of Concept Tile Corporation (a Florida Corporation Document Number P93000004468) am the uncle of Jorge Ivan Martinez, owner of Concept Tile & Remodeling LLC (a Florida Corporation Document Number L15000075186). I would hereby like to state in this letter that I grant authorization to my nephew for use of the name Concept Tile LLC as the name change to his existing business. Let it be known that I am only authorizing the use of name and am not in any way involved or make decisions in his business entity nor is he involved or make decisions in my existing business entity. If you have any questions or concerns please feel free to contact me at the above mentioned phone number.

Leve & ATA Sincerely,

ARTICLES OF TO ARTICLES OF O	O PRGANIZATION	1
0	ľ	
Concept Tile & Lenne Name of the Limited Liability Compar (A Florida Limited L	adeling Ll ny as it now gippears on ou iability Company)	<u>rrecords.</u>
The Articles of Organization for this Limited Liability Company	were filed on $4/28$	3/2015 and assigned
Florida document number <u>L15000975186</u>	- 1 -	
This amendment is submitted to amend the following:		
u u u u u u u u u u u u u u u u u u u	····	
A. If amending name, enter the new name of the limited liabit $Concept$ Tile, LLC. The new name must be distinguishable and contain the words "Limited Liabit		
The new name must be distinguishable and contain the words "Limited Liabil		
Enter new principal offices address, if applicable:	N /A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	<u>N/A</u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		records, <u>enter the name of the new</u>
Name of New Registered Agent: <u>N/A</u>		

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.

Cin

N/A If Changing Registered Agent, <u>Signature of New Registered Agent</u>

Florida _

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
	N/A	····	🗆 Add
		<u> </u>	CRemove
			Change
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		Add 2017	
			<u> </u>
			Change

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

	<u>N/A</u>
—	
_	
_	
(II an effec <u>Note:</u> I	the date, if other than the date of filing: N/A (optional) tive 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 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 00th day after the record is filed.
Dated _	May 24th 2017
	Signature of a member or authorized representative of a member

Page 3 of 3

YORADA -

PM 3: 12

Filing Fee: \$25.00