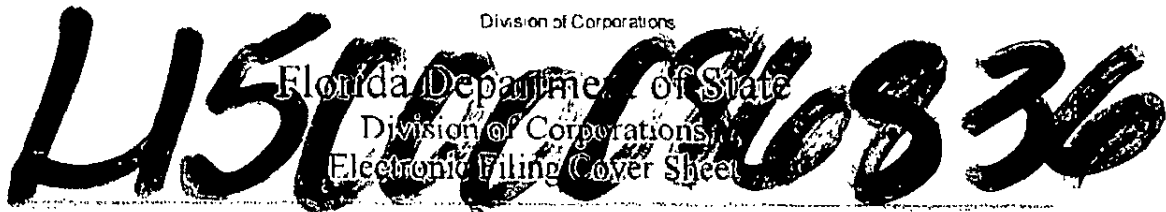


8/27/2015

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000207244 3)))



H150002072443AECZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

2015 AUG 27 2:10 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JUNIOR TILE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED

15 AUG 27 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 28 2015
J. BRUCE

H150002072443

H150002072443

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JUNIOR TILE 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:

SAVANA MYLLYS SILVA

Name of Person

ACCOUNT BOOKKEEPING CORP

Firm/Company

3300 S HIAWASSEE RD STE 106

Address

ORLANDO, FL 32835

City/State and Zip Code

INFO@ABKCORP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAVANA MYLLYS SILVA

Name of Person

407

at (Area Code

898-175

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

H150002072443

2015 AUG 27 A 10:09
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H150002072443

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUNIOR FILE 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 05/15/2015 and assigned
Florida document number L15000086336

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)

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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

H150002072443

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	RINCON AYALA, CESAR ALONSO	2810 JOLEEN DR	☒ Add
		EUSTIS, FL 32726	☐ Remove
			☐ Change
MGR	MARTINEZ, CORTEZ, GUSTAVO	2810 JOLEEN DR	☒ Add
		EUSTIS, FL 32726	☐ Remove
			☐ Change
MGR	EVER VAZQUES, JOSE	2810 JOLEEN DR	☒ Add
		EUSTIS, FL 32726	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
2015 AUG 27 10:09
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

H150002072443

FILED
2015 AUG 27 A 09 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. 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.

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

Dated 27 AUGUST 2015

Signature of a member or authorized representative of a member

JOSE EUGENIO MARTINEZ-CORTEZ

Typed or printed name of signer