

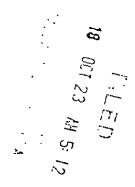
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COVER LETTER

TO: Registration Sec Division of Corp			
0410 10 000	ORING LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	MARIA D LAGUNAS		
	GEOR FLOORING LLC	Name of Person	
		Firm/Company	
	1687 BALSA CT		
		Address	
	Orange Park, FL 32073		
	lagunas.rosario@yahoo.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	cation)
For further information co	ncerning this matter, please ca	all:	
MARIA D LAGUNAS		904 327 2412 at ()	
Name of	Person	Area Code Daytime	felephone Number
Enclosed is a check for th	e 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

GEOR FLOORING LLC		
(<u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on our record rida Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability		and assigned
Florida document number L15000125866	·	
This amendment is submitted to amend the following	:	ė
A. If amending name, enter the new name of the l	imited liability company here:	051 2
he new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		ls, <u>enter the name of the</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	55
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		lorida
	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

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> Jorge A Orta Gonzalez	<u>Address</u>	Type of Action
VP			
		ORANGE PARK, FL 32073	
			Remove
	Cornon Javanov Harrara	13108 Mandarin Road	Change
MGR	Gerson Jovanny Herrera	13108 Mandann Road	
		Jacksonville, FL 32223	Add
			Remove
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lote: If the date inserted in this bl	ock does not meet the applicable statu	filing or more than 90 days after fil tory filing requirements, this d	ing.) Pursuant to 605.0 ate will not be listed
ocument's effective date on the Di	partment of State's records.		
e record specifies a delayed The 90th day after the rec	effective date, but not an eff ord is filed.	ective time, at 12:01 a.n	n. on the earlier
October 18 ated	. 2018		
/	MANA LAGON FE	₹.	

Page 3 of 3

Filing Fee: \$25.00