

L15000163575

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160

Phone : (800) 494-3124

Fax Number : (305) 675-2811

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**LUIGI'S FLOORING & PAINTING LLC**

Certificate of Status	0
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FAX 12/11/2017 5:11PM

2017 DEC 11 PM 5:37

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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LUIGI'S FLOORING & PAINTING 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 SEPTEMBER 25TH, 2015 and assigned
Florida document number L15000163575.

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)

1318 N 14TH STLEESBURG, FLORIDA 34748

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1318 N 14TH STLEESBURG FLORIDA 34748

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:

JOSE LUIS GUILLEN

New Registered Office Address:

1318 N 14TH ST

Enter Florida street address

LEESBURG, Florida 34748

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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GUILLEN, JOSE LUIS	1318 N 14TH ST	<input type="checkbox"/> Add
		LEESBURG FLORIDA 34748	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	GUILLEN, MARIA D ROSARIO, SR	615 STANLEY AVE	<input type="checkbox"/> Add
		WILDWOOD, FL 34785	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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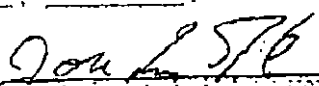
E. Effective date, if other than the date of filing: _____ (optional)

(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 _____ DECEMBER 7TH _____ 2017



Signature of a member or authorized representative of a member

JOSE LUIS GUILLEN

Typed or printed name of signee