# L16000001129

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### **COVER LETTER**

TO: Registratio Division of	n Section Corporations
	Clooring Installation, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
Please return all corre	espondence concerning this matter to the following:
	Christine Riley
	Name of Person
	A&C Flooring Installation, LLC
	Firm/Company
	11040 Tanton Lane
	Address
	Pensacola, FL 32506
	City/State and Zip Code
	layerac@cox.net
	E-mail address: (to be used for future annual report notification)
For further informati	on concerning this matter, please call:
Christine Riley	573 745-0757 at ()
Na	me of Person Area Code Daytime Telephone Number
Enclosed is a check to	for the following amount:
■ \$25.00 Filing Fe	e \$\square\$ \$30.00 Filing Fee & \$\square\$ \$55.00 Filing Fee & \$\square\$ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  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

A&C Flooring Installation, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com- Florida document number L16000001129	npany were filed on December 31, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d 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 ADDRES	(2.2)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16 J
		15 25 FE
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		er the name of the ne
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	Estar Prostati Sir eer addiress	
·	, Florida	Zip Code
	CHY	en our

#### 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	William Braeden Kitchen	1104 Tanton Court, Pensacola, FL 32500	Add
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fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and cannot be prior to date of f	filing or more than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in this block does not meet the applicable statut ocument's effective date on the Department of State's records.	fory thing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m. on the earlier
The 90th day after the record is filed.	
ated,	
and what signature of a member or authorized repre	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00