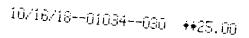
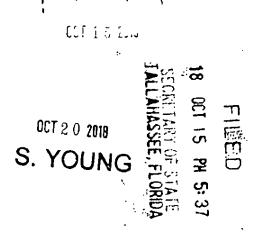


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Special Instructions to	Filing Officer:	

Office Use Only







COVER LETTER

	stration Section sion of Corporations		•		
SUBJECT:	Forte	Stone Name of Limite	Tile LLC ed Liability Company		
The enclosed	Articles of Amendment ar	d fee(s) are subm	itted for filing.		
Please return	all correspondence concer	ning this matter to	the following:		
		Javie	Name of Person	-	
			Name of Person		_
	F	orte	Slone Tile	LLC	 -
			Firm/Company		
	3_	3 Bun	Ker View	Dr. D.	15 TO
		alm (o	City/State and Zip Code	52137	FIELD FIELD
		1	City/State and Zip Code		7
	<u>~</u>	Da(605a E-mail address: (to	be used for future annual report no	ch oo · C com	`. <u>95</u> 3
For further inf	formation concerning this				
Jav	er Hernan	dez Peri	e Z at (<u>386)</u> <u>569</u> Area Code Dayt	. 7399	
	Name of Person		Area Code Dayt	ime Telephone Numbe	г
Enclosed is a	check for the following an	nount:			
\$25.00 Fil		ling Fee & ate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &

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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) 01/27/2016 The Articles of Organization for this Limited Liability Company were filed on Florida document number _ L160000 19022 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 City

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>	Name	Address	Type of Action
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Filing Fee: \$25.00