## 16000021838

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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## **COVER LETTER**

Division of Corpo	orations		
SUBJECT: THE	grity Flooring	ngs More uc	
•	Name of Limit	ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subm	nitted for filing.	
Please return all correspond	lence concerning this matter to	o the following:	
	Duane I	). Reeves Name of Person	
	INtegrity	Firm/Company 5 More	e, UC
	810 1/2 Brade	dude Rd.	
		Address	
	Auburndale	e Al 33823	
	1 (	City/State and Zip Code	•
	Integritud 1000	ing N morelleys be used for future annual report notificat	than.com
For further information con	cerning this matter, please cal		
DUMLE D	eeves	at (863 ) 701-551	1.
Name of F	'erson		elephone 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** 

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

The surfy flooring (Name of the Limited Liability Compa) (A Florida Limited Liability Compa)	More, Luc ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number LIGOOO21838	were filed on Feb 1, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	810 112 Bradde Auburndale, Fl	od Rd. 33823
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the pame of the new
Name of New Registered Agent:		ASS.
New Registered Office Address:	Enter Florida street address	EE. FLO
	, Florid	
	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

MGR = M AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jesse L. Patterson	810/12 Braddock Kd	
:		810112 Braddock Kd Aubundaly Fl 33823	Remove
			☐ Change
AMBR	MARIO L. CASTRO	8101/2 Braddock Rd Aubundele 71 33823	□ Add
		Aubundele 71 33823	Remove
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		DRIDA	☐ D'Add
			□ Remove
			Change
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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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an effective dat lote: If the da	, if other than the die is listed, the date must be the inserted in this bloc ective date on the Dep	e specific and car k does not mee	nnot be prior to t the applicab		more than 90 days			
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Filing Fee: \$25.00