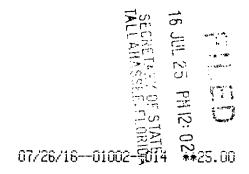
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J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Carpentry Hart Copans LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Orlando Sarcía Name of Person
Carpentry Mart Copans LLC
1901 W Copans RD
Pomparo Beach, FL 3304 City/State and Zip Code  The Carpentry Mart. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Orlando Carcía at (786) 399 9689  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$(additional copy is enclosed)}\$\$\$ 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**

Carpentry	Mart Copans LLC
(Name of the Limited/L (A F	lability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabil	lity Company were filed on $03/28/2016$ and assigned $30$ .
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e 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 A	DDRESS)
Enter new mailing address, if applicable:	PH IZ: 03 E.FLORID
(Mailing address MAY BE A POST OFFICE BO)	<u>x)</u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
_	, Florida
New Registered Agent's Signature, if changing Regi	stered 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>	Address	Type of Action		
<u>_</u>	MORIA A. BUMassisi	10180 NW 28 TCR	🖸 Add		
		DORAL, FL 33172	Remove		
			Change		
VP	ABdias Villalobos	1901 W Copans RD			
		Pompano Beach, Fr	□ Remove		
		33064	Change		
	Orlando Carcía	1901 W Copans RD	🗆 Add		
	V	Pompano Beach Fl	□ Remove		
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ffective	e date, if other than the date of filing: 07   19   20   (optional)	
an effect Note: If	tive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the date on the Department of State's records.	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie Oth day after the record is filed.	er of:
	2/10/2016	
Dated	07/19/2016	
	Signature of a member of authorized representative of a member	THE STATE
	Typed or printed name of signee	I Videos
		A STREET
	Page 3 of 3	A STANDARD

Filing Fee: \$25.00