LIG 0000 46 160

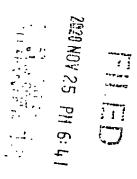
(Requestor's Name)	
(Address)	<u> </u>
(Address)	·
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	

Office Use Only



300355580293

11/25/20--01010--015 **30.00



14N 11 2021 S. YOUNG

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp			
SUBJECT:	WORLD TILI	ETRANSPORT LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		JORGE GARCIA	
		Name of Person	
	W()	RLD TILE TRANSPORT LLC	
		Firm/Company	
		5480 16TH PL SW # 204	
		Address	
		NAPLES, FL. 34116	
	-	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	(fication)
For further information ec	oncerning this matter, please ca	all:	
JORGE C	TARCIA	239 692-4454 at ()	
Name of	Person	Atea Code Daytin	ne Telephone Number
Inclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)
Mailing Address		Street Address:	
Registration Section Division of Corporations		Registration Se Division of Cor	
P.O. Box 6327		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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) The Articles of Organization for this Limited Liability Company were filed on			NO CO
The Articles of Organization for this Limited Liability Company were filed on 05/02/2016 and assigned Florida document number L16000086160 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FLOOR TO CEILING KITCHEN DESIGN LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florida			
The Articles of Organization for this Limited Liability Company were filed on 05/02/2016 and assigned Florida document number L16000086160 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FLOOR TO CEILING KITCHEN DESIGN LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florida	(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on our records.) Liability Commany)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
A. If amending name, enter the new name of the limited liability company here: FLOOR TO CEILING KITCHEN DESIGN LLC The new name must be distinguishable and contain the words "Lamited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florida Florida	The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.16000086160}{1.16000086160}$.		and assigned
FLOOR TO CELLING KITCHEN DESIGN LLC The new name must be distinguishable and contain the words "Lumited Liability Company," the designation "LLC" or the abbreviation "LLC." 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	This amendment is submitted to amend the following:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florida	A. If amending name, enter the new name of the limited liab	ility company here:	
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 address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	FLOOR TO CEILING KIT	TCHEN DESIGN LLC	
Enter new mailing address. if applicable: [Mailing 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	The new name must be distinguishable and contain the words "Limited Laabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
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 Florida	Enter new principal offices address, if applicable:	5480 16TH PL SW APT 204 NA	PLES, FL. 34116
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent:	(Principal office address MUST BE A STREET ADDRESS)		
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5480 16TH PL SW APT 204 NA	PLES, FL. 34116
Enter Florida street address Florida	agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter th</u>	e name of the new registered
Florida	New Registered Office Address:	Enter Florida street address	
City Zin Code			da 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 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
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			☐Remove
			□Change
			
			□Remove
			□ Change

(If an ef <u>Note:</u>	ctive date, if other than the date of filing:
If the reco record is f	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 ed.
Date .	NOVEMBER 18 2020
Dated	
	Signature of a thember or authorized representative of a member

Typed or printed name of signee