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COVER LETTER

TO:	Registration Sec Division of Corp	ction porations		
cupted		face Solutions, LLC		
SUBJEC	T:		ited Liability Company	
The encle	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ret	iurn all correspo	ndence concerning this matter	to the following:	
		Kasey D. Hilyard		
		<u> </u>	Name of Person	
		Einstein Surface Solutions,		
			Firm/Company	
		11730 Regal Ridge Ln	, ,	
			Address	
		Clermont, FL 34711		
		info@einsteincarpets.com	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please ca	aH:	
Kasey D.	. Hilyard		407 488-9879 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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 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

Einstein Surface Solutions, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records. Liability Company)	.)
The Articles of Organization for this Limited Liability Company Torida document number L16000086792	were filed on 05/03/2016	and assigned
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	11730 Regal Ridge Ln	
Principal office address MUST BE A STREET ADDRESS)	Clermont, FL 34711	
		
Enter new mailing address, if applicable:	PO Box 120273	FT
Mailing address MAY BE A POST OFFICE BOX)	Clermont, FL 34712	
	- -	110
3. If amending the registered agent and/or registered o	ffice address on our records	antor the name of the na
egistered agent and/or the new registered office address her		enter the name of the ne
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	~ II i	$m \in \mathcal{M}$

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</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Eric J. Hilyard		
			Remove
		11730 Regal Ridge Ln Clermont, FL 34711	■ Change
MGR	Kasey D. Hilyard		
			□ Remove
		11730 Regal Ridge Ln Clermont, FL 34711	■ Change
			Remove
			□ Change
			□ Remove
			□ Change
		 	
			☐ Remove
			Change
			□ Add
			☐ Remove

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Effective date, if other than the first an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	sust be specific and cannot be block does not meet the ap	prior to date of filing or more oplicable statutory filing r	(optional) than 90 days after filing.) Pursuant equirements, this date will not	t to 605.0207 (be listed as t
ne record specifies a delay The 90th day after the re		t not an effective tim	e, at 12:01 a.m. on the	earlier of
September 9 Dated	2019	·		
- k	1	5		
	Signature of a member or	authorized representative of	a member	_

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Typed or printed name of signee

Filing Fee: \$25.00