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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration S Division of Co					
	R FLOOR COATINGS, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Craig I. Kelley				
		-			
	Kelley Kaplan & Eller, PL	LC.			
		Firm/Company			
1665 Palm Beach Lakes Blvd. Suite 1000					
	<u></u>	Address		. ~	
	West Palm Beach, Fí. 334	01		2023 DEC SECRETA	f()
		City/State and Zip Code		EC 2	
	craig@kelleylawoffice.com		 		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notificat	tion)	M 9:	: د جمر مراب
Craig I. Kelley		561 491-1200 at ()		32	
Name (of Person		clephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUPERIOR FLOOR COATINGS		
(Name of the Lim	ted Liability Company as it now apply (A Florida Limited Liability Company	ears on our records.)
ne Articles of Organization for this Limited I	iability Company were filed on	05/24/2016 and assigned
orida document number L16000101330		
is amendment is submitted to amend the fol	lowing:	
If amending name, enter the new name	of the limited liability company	<u>here</u> :
new name must be distinguishable and contain the	words "Limited Liability Company," the	
ter new principal offices address, if appli	cable:	<u> </u>
incipal office address MUST BE A STRE	ET ADDRESS)	
		385 63
		27 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE	<u>BOX)</u>	
ent and/or the new registered office addre		records, enter the name of the new regis
Name of New Registered Agent:	Clarg 1. Reliey	
New Registered Office Address:	1665 Palm Beach Lakes Blvd. S	
		Florida street address
	West Palm Beach	, Florida 33401
	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.

f 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
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ffective date, if other than	the date of filin	ıg:		(opti	onal)	(05.00
an effective date is listed, the date Note: If the date inserted in the	is block does not	meet the applical	ble statutory filing	g requirements, thi	s date will no	ot be listed a
locument's effective date on t	ne Department of	State's records.				
record specifies a delayed eff d is filed.	ective date, but no	t an effective tim	ne, at 12:01 a.m. o	on the earlier of: (l) The 90th	day after th
		2023				
December 11						
December 11		raig 1. la	elly ized representative			