L16000 120797

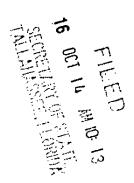
(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Doc	cument Number)	•
Certified Copies	Certificates	e of Status
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Special Instructions to F	-iling Officer:	





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D. SCOTT 0CT 17 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2016

PATRICK WILKINSO JR 3835 BELLE MEADE COURT #B PENSACOLA, FL 32503

SUBJECT: WILKINSON FLOORING LLC

Ref. Number: L16000120797

We have received your document for WILKINSON FLOORING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 416A00019035



COVER LETTER

TO: Registration Se Division of Cor					
Wilkinson l	Flooring LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are submitted for filing.				
Please return all correspo	ondence concerning this matter to the following:				
	Patrick Wilkinson Jr				
	Name of Person				
	Wilkinson Flooring LLC				
	Firm/Company				
	3835 Belle Meade Court # B				
	Address				
	Pensacola, Fl 32503				
	City/State and Zip Code				
	mrswhatever 23@aol.com				
	E-mail address: (to be used for future annual report notification)				
For further information of	concerning this matter, please call:				
Patrick Wilkinson Jr	251 978-7996				
Name o	of Person Area Code Daytime Telephone Number				
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Sta (additional copy is enclosed) Certified Copy (additional copy is enclosed)	tus &			

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

Wilkinson Flooring LLC

(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability Organization for the Liability Organization for t	Company were filed on June 23, 2016 and as	signed
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or the abbreviation "I	L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		
Enter non-mailing address to applicable.		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	-	
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	stered office address on our records, <u>enter the name</u> dress here:	of the new
New Registered Office Address:	Enter Florida street address	
<u> </u>	, Florida	
New Registered Agent's Signature, if changing Registere		. .
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a	t and agree to act in this capacity. I further agree to com complete performance of my duties, and I am familiar w agent as provided for in Chapter 605, F.S. Or, if this doc red office address, I hereby confirm that the limited liabi	cument is

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
MGR	Patrick Wilkinson Jr	3835 Belle Meade Court #B	■ Add
		Pensacola, Fl 32503	
			Change
			□ Remove
		<u></u>	Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			□ Change
		<u></u>	
			□ Remove
			Charge S
			Add To The Total
			Remove
			Change Change

D. If amending	g any other informati	ion, enter change(s) here: (Attach	additional sheets, if necessary.)	
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				_
				
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(If an effective Note: If the	date inserted in this blo	date of filing: be specific and cannot be prior to date of fi ck does not meet the applicable statute partment of State's records.	(optional) ling or more than 90 days after filing.) Pu ory filing requirements, this date wil	ursuant to 605.0207 (3)(b) I not be listed as the
(f the record : (b) The 90th	specifies a delayed a day after the reco	effective date, but not an effeord is filed.	ctive time, at 12:01 a.m. on	the earlier of:
Dated Augu	st, 31	2016		
	ラ	111111111111111111111111111111111111111		
		Signature of a member of authorized repres	sentative of a member-	
P	atrick Wilkinson Jr			TEST OF
_		Typed or printed name of s	ignee	司司司司
		Page 3 of 3		
		Filing Fee: \$25.0	00	
				复刊 5