46000128150

(Requestor's Name)
(Address)
(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



600320989926

11/20/18--01013--020 **25.00

2018 NOV 20 PH 1: 3

C. GOLDEN DEC -1 2018

COVER LETTER

	Registration S Division of Co				
SUBJEC	NEW CAI	RPET SOLUTIONS LLC			
	•	Name of Lir	nited Liability Company		
The enclo	sed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please ret	urn all corresp	ondence concerning this matter	r to the following:		
		MARCELO BASSO JR			
	Name of Person NEW CARPET SOLUTIONS LLC				
Firm/Company 2931 METRO SEVILLA DR #104					
	Address ORLANDO FL 32835				
		DALLEPRANEBASSO@0	City/State and Zip Code GMAIL.COM		
			to be used for future annual report notif	ication)	
For further	information c	oncerning this matter, please c	all:		
MARCEL	O BASSO		407 5792613		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is	s a check for th	ne following amount:			
■ \$25.00	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

FILED

2018 NOV 20 PM 1: 31

NEW CARPET SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

	, , , , , , , , , , , , , , , , , , , ,	
The Articles of Organization for this Limited Li	07/06/2016 ability Company were filed on	5 and assigned
Florida document number L16000128150		and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	
Principal office address MUST BE A STREE	TADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE H	eovi	
3. If amending the registered agent and/o	r registered office address on our rec	ords, enter the name of the n
egistered agent and/or the new registered off	ice address here:	
None of the Date of the		
Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Florida street ad	ddress
		. Florida
	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.

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>	Name	Address	Type of Action
MRS	SAMELLA DALLEPRANE		<u> </u>
		7031 METRO 973/41 1 - DO	
		2931 METRO SEVILLA DR #104 ORLANDO FL 32835	■ Remove
			□ Change
			□ Remove
			Change
			Remove
			Change
			Remove
			Change
			Remove
			Change
			Remove
			Change

OWNER			<u>_</u>			 .
						
						
					-	
						
			<u>-</u>		·	
						
						
						
	·				<u> </u>	
				<u>.</u>		
		- <u>-</u>				
		11112	- /2010	_		
Effective date, if other th	an the date of	f filing:	5/2018		(optional	`
f an effective date is listed, the c	late must be speci	ific and cannot b	pe prior to date o	f filing or more the	00 0 611	\ [3
Note: If the date inserted in document's effective date or	THIS DIOCK GOES	s not meet the	applicable stat	utory filing requ	frements, this date	will not be listed as
	· me is opai tine	m or state 3 fe	cords,			
ne record specifies a de	alayed offoct	tivo dato. b		£L:		
ie record specifies a de The 90th day after th	e record is f	live date, bi filed.	ut not an ei	rective time,	at 12:01 a.m.	on the earlier o
Dated		2018				
1//	1	· حزے	·			
ta	wol	Tarline	· ·			
		00.774		resentative of a m		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00