

L16000136302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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09/27/16 01005 006

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16 SEP 23 PM 1:56

DIVISION OF CORPORATIONS

O SIMMONS

SEP 27 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gardners All Around ~~Flawed~~ Flooring LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Phillip Cohen

Name of Person

C

Firm/Company

2446 Vermont ct

Address

Cape Coral FL 325 33991

City/State and Zip Code

Cohen68@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phillip Cohen

Name of Person

at

772

Area Code

485-8114

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Gardner All Around Flooding LLC

(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 7/20/16 and assigned
Florida document number L16000136302.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

C & H Repairs & Cleaning Services, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

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DIVISION OF CORPORATE FILINGS

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:

Phillip Cohen

New Registered Office Address:

2446 Vermont St

Enter Florida street address

Cape Coral

City

Florida

33991

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Phillip Cohen	2446 Vermont Ct	<input checked="" type="checkbox"/> Add
		Cape Coral, FL 33991	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kevin Gardner	2446 Vermont Ct.	<input type="checkbox"/> Add
		Cape Coral, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

16 SEP 23 11:57
DIVISION OF CORPORATIONS

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16 SEP 23 PM 1:51
DIVISION OF CORRECTIONS

16 SEP 23 PM 1:57
DIVISION OF CONFESSIONS

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated

9/19/2016

~~Signature of a member or authorized representative of a member~~

Phillip Ryan Cohen
Typed or printed name of signer