L16000151253

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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COVER LETTER *

Divis	sion of Corp	ooratio ns		
SUBJECT:	ND JOHNS	ON ENTERPRISES, LLC		·
		Name of Lim	ited Liability Company	;
The enclosed	Articles of A	Amendment and fee(s) are sub	emitted for filing.	
Please return a	all correspor	ndence concerning this matter	to the following:	
		RODERICK O. JOHNSON	N III	
			Name of Person	
		1	Firm/Company	
		2911 CORTEZ ROAD WE	EST	
			Address	
		BRADENTON, FL 34207		
			City/State and Zip Code	
		rojohns1980@gmail.com	to be used for future annual report notific	
			•	catton)
For further inf	formation co	ncerning this matter, please co	ali:	
Roderick "De	rick" Johnso	on .	941 725-0481 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$2 5.00 Fil	ling 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:

TO:

Registration Section

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

11D Johnson Enterprises, 1200		
(Name of the Limited Liability (A Florida L	Company as it now appears of imited Liability Company)	n our records,)
The Articles of Organization for this Limited Liability Cor	mpany were filed on $\frac{8/127}{1}$	2016 and assigned
Florida document number L16000151253	• •	
Torrow document number	•	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	ed liability company here	;
Wade's Carpet & Interiors, LLC		
he new name must be distinguishable and contain the words "Limite	d Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	(22)	
		i
Inter new mailing address, if applicable:		
<u>Malling address MAY BE A POST OFFICE BOX)</u>		
		<u> </u>
3. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:	<u>ss here</u> :	ur records, enter the name of the
New Registered Office Address:		
	Enter Florida	street address
		, Florida
	City	Zip Code
lew Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent an rovisions of all statutes relative to the proper and concept the obligations of my position as registered age eing filed to merely reflect a change in the registered ompany has been notified in writing of this change.	nplete performance of m ent as provided for in Ch	y duties, and I am famtitar with and apter 605, F.S. Or, if this document i
	If Changing Degletered Acce	
	11 Changing Registered Agen	t, Signature of New Registered Agento

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
		<u>-</u>	Add
		Part SACEA - 1994 Part - 1994	□ Remove
			□ Change
			☐ Add
			□ Remove
			Change
			□ Add
	•		C Remove
·			□ Change
			D Add
			□ Change
·			
			☐ Remove
			17 APR 21 SEGNETA AND AND AND AND AND AND AND AND AND AN
·			ASSET IT

. If amen	ding any other informatio	n, enter change(s) here: (Attach additional sheets, if neces	isary.)
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Effective	e date, if other than the da	ite of filling: (options specific and cannot be prior to date of filling or more than 90 days after it	nal) filing.) Pursuant to 605.0207 (
Note: If	the date inserted in this block it's effective date on the Depa	does not meet the applicable statutory filing requirements, this	date will not be listed as t
	rd specifies a delayed e Oth day after the record	ffective date, but not an effective time, at 12:01 and is filed.	.m. on the earlier of:
Dated A	pril 13	2017	·
	MOM		17 AP SECRE
	Sig	gnature of a member or authorized representative of a member	RASS HASS
	Roderick O. Johnson III	Typed or printed name of signee	
		cypes of printed mane of arguee	FLORI
		Page 3 of 3	₽₩ -

Filing Fee: \$25.00