

116000198699

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2017 JAN 19 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

JAN 20 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ULTIMATE FLOORING, BATHS & MORE, 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:

Marco T. Morales Doblado

Name of Person

ULTIMATE FLOORING, BATHS & MORE, LLC

Firm/Company

640 8th Street #225

Address

Daytona Beach, FL 32117

City/State and Zip Code

tuliomarco85@icloud.com

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

For further information concerning this matter, please call:

Marco T. Morales

386 265-9714

Name of Person

at ()
Area Code

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**

ULTIMATE FLOORING, BATHS & MORE, LLC

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

FILED
2017 JAN 19 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/27/2016 and assigned Florida document number L16000198699.

This amendment is submitted to amend the following:

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

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)

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:

New Registered Office Address:

Enter Florida street address

_____, 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Marco T. Morales Doblado	640 8th Street #225	<input checked="" type="checkbox"/> Add
		Daytona Beach, FL 32117	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Candelaria C. Menjivar	640 8th Street #225	<input type="checkbox"/> Add
		Daytona Beach, FL 32117	<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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2018 JAN 18 PM 12:48
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

2017 JAN 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2017 JAN 19 PM 4:48
CLERK OF DISTRICT COURT
STATE OF FLORIDA
TALLAHASSEE

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 01/13/, 2017.

Signature of a member or authorized representative of a member

Calendaria C. Menjivar

Typed or printed name of signee