L16000209174

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
<u></u>	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
,	`	



800293156218

12/14/16--01010--018 **52.50

17 JAN - 4 FM IS-21.

**RECARDASSEED FLORIDA

Office Use Only

JAN 1 1 2017 Y SULKER



December 15, 2016

RODOLFO BARRERA 14617 APALACHEE ST NAPLES, FL 34114 US

SUBJECT: KINGS OF TILE LLC Ref. Number: L16000209174

We have received your document for KINGS OF TILE LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 416A00026713

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kings OF The 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:
Rodolfo Barrera Name of Person
Kings- Of Tile 11C Firm/Company
14617 APAIACHES ST.
Neights, F1. 34/14 City/State and Zip Code
Barrerar 1440 Gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (239) 465-2869 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \Bigcup \\$55.00 Filing Fee & \Bigcup \\$60.00 Filing Fee, Certificate of Status \$\Bigcup \\$ Certified Copy (additional copy is enclosed) 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

<u> Kings 08</u>	- Tile LLC
(<u>Natific of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number 11600209	·
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of the	he limited liability company here:
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ox)
	SS -
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, enter the name of the new ce address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
registered agent and/or the new registered office Name of New Registered Agent:	Enter Florida street address

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 **Type of Action** <u>Title</u> <u>Name</u> **Address** Miguel J Sanchez ☐ Change _□ Add _□ Remove □ Change _□ Add Remove ☐ Change ☐ Add □ Remove □ Change □ Add □ Remove

☐ Change

nmending any other information, enter change(s) here: (Attach additional sheets	; if necessary.)
	·
	·
	17
	JAN
	\$3.5 €
	<u> </u>
Tective date, if other than the date of filing: neffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date. If the date inserted in this block does not meet the applicable statutory filing requirement of State's records.	_ (optional) lays after filing.) Pursuant to 605.02 ents, this date will not be listed
record specifies a delayed effective date, but not an effective time, at 1 The 90th day after the record is filed.	2:01 a.m. on the earlier
ted 12-26-16 ,	
ma	
Semalare of a member or authorized representative of a member	r

Page 3 of 3

Filing Fee: \$25.00