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| PICK-UP                   | ☐ WAIT            | MAIL        |
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| Certified Copies          | _ Certificates    | s of Status |
| Special Instructions to I | Filing Officer:   |             |
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

K. SALY JUN - 9 2017

## **COVER LETTER**

| , Division          | of Corporations  |        |
|---------------------|--|--------|
| AM<br>SUBJECT:      | ERICAN BATHTUB RESURFACING, LLC  |        |
|                     | Name of Limited Liability Company  |        |
| The enclosed Arti   | cles of Amendment and fee(s) are submitted for filing.   |        |
| Please return all c | prrespondence concerning this matter to the following:   |        |
|                     | michael levine   |        |
|                     | Name of Person   |        |
|                     | American Bathtub Resurfacing, LLC  |        |
|                     | Firm/Company   |        |
|                     | 3046 Sunrise Blvd  |        |
|                     | Address  |        |
|                     | Ft Pierce, FL 34982  |        |
|                     | City/State and Zip Code  |        |
|                     | quickbathtubs@gmail.com  |        |
|                     | E-mail address: (to be used for future annual report notification)   |        |
| For further inform  | ation concerning this matter, please call:   |        |
| michael levine      | 772 882-5679<br>at ()  |        |
|                     | Name of Person Area Code Daytime Telephone Number  |        |
| Enclosed is a chec  | k for the following amount:  |        |
| □ \$25.00 Filing    | Fee \$\Bigsquare\sqrt{\$30.00\ \text{Filing Fee} &  \text{\$\subsquare}\$\$ \$55.00\ \text{Filing Fee} &  \text{\$\subsquare}\$\$ \$\$ \$60.00\ \text{Filing Fee},  \text{\$\centrificate of Status}\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ | itus & |

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

FILED

2017 JUN-8 AM 11:53

ALLAHASSEE, FLORIDA

American Resurfacing, 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  $\frac{04-12-17}{12-17}$ and assigned Florida document number 173466082027 \$\frac{170000 \& 2027}{20000}\$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: American Bathtub Resurfacing, 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) 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 Citv 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>       | Address                            | Type of Action                                  |
|--------------|-------------------|------------------------------------|---|
| AMBR         | Michelle J levine |                                    | □ Add   |
|              |                   | 3046 Sunrise Blvd, Ft Pierce FL 34 | ■ Remove  |
|              |                   |                                    | □ Change  |
| AMBR         | Michael R Levine  | 3046 Sunrise Blvd, Ft Pierce FL 34 | ■ Add   |
|              |                   |                                    | □ Remove  |
|              |                   |                                    | Change  |
|              |                   |                                    | □ Add   |
|              |                   |                                    | SECRE Change                                    |
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|              |                   |                                    | Change  |
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|              |                   |                                    | ☐ Remove  |
|              |                   |                                    | Change  |
|              |                   |                                    |   |
|              |                   |                                    | Remove  |
|              |                   |                                    | □ Change  |

| WI                        | E ARE ADDING MICHAEL R LEVINE AS AN AMBR AND LEAVING HIM AS THE MANAGER TOO.   |
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|                           | 05-31-2017   |
| e <b>ctiv</b> e<br>effect | e date, if other than the date of filing: (optional) tive 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 605.6  |
| te: If                    | the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed<br>at's effective date on the Department of State's records.  |
| · ciii ioii               | it is effective date of the peparament of outer a feetores.  |
| reco                      | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies  |
|                           | Oth day after the record is filed.   |
|                           | -/21 201D 0  |
| ed _                      | 6/01   |
|                           |  |
|                           | Signature of a member or authorized representative of a member   |

Page 3 of 3

Filing Fee: \$25.00