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(Cit	ty/State/Zip/Phone #)	)
PICK-UP	WAIT	MAIL
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(Bu	siness Entity Name)	
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## **COVER LETTER**

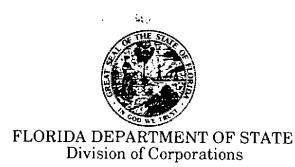
TO: Registration Section Division of Corporations
SUBJECT: Supreme Corpertry & FURNITURE, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Miggald Taban Name of Person
Inversiones Gonzalez, LLC
19544 SW 42nd Ct Address
Miramor FL 33029  City/State and Zip Code  Migrand L @ hofmail.com  E-mail address: (to be used for future annual report notification)
mos. Isemton (1) Licentin
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mg 3 d Tobon at (786) 781 - 8736  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

## 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



August 9, 2019

MIGIAD TABAN 19544 SW 42 CT MIRAMAR, FL 33029

SUBJECT: SUPREME CARPENTRY & FURNITURE LLC

Ref. Number: L17000088695

We have received your document for SUPREME CARPENTRY & FURNITURE LLC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This is a LLC the document you sent in is for a Corporation.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

2019 AUG 22 AM 11: (

Letter Number: 419A00016431

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	mentry &	FUNTURE any as it now appear Liability Company)	s on our records.)	<del>1 = (</del> )
( <u>. iams &amp; inc ismin</u>	(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited Li		were filed on	)4/20/2007 ABG	<u>21</u> an <b>P</b> ask∰g <b>6</b> 21
Florida document number <u>L170000834</u>	<u> 195                                    </u>		SECRETA	ARY OF STATE SSBE, FLORIDA
This amendment is submitted to amend the following	owing:		VALLAIM	SSCE. FLURIDA
A. If amending name, enter the new name of	the limited liab	oility company ho	<u>ere</u> :	
N/A				
The new name must be distinguishable and contain the w	ords "Limited Liabi	ility Company," the d	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applica	able:	N/A	<del></del>	
(Principal office address MUST BE A STREE	T ADDRESS)	· 		
Enter new mailing address, if applicable:		N/A		
Mailing address MAY BE A POST OFFICE 1	BOX)	<del></del>		
	<u> </u>			
B. If amending the registered agent and/oregistered agent and/or the new registered of	•		our records, <u>enter</u>	the name of the r
Name of New Registered Agent:	N/A			
Ni Dia 1005 All	NIA			
New Registered Office Address:	<del></del>	Eruer Flor	rida street address	
		N/A	, Florida	
		City		Zip Code
New Registered Agent's Signature, if changing R	tegistered Agent:	<u>.</u>		
hereby accept the appointment as registered	_			
provisions of all statutes relative to the prope accept the obligations of my position as regis				
being filed to merely reflect a change in the r			-	-

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jorge TABAN	8159 NW 116th Ct	■ Add
		DOTAL, FL	□ Remove
		33178	□ Change
MGR	DANY CABRERA	12346 SW 259th St	■ Add
		12346 SW 259th St Homestead, FL 33032	Remove
			Change
	NA		
			□ Remove
	, 1		Change
N/A	N/A		🗅 Add
			□ Remove
			Change
N/A	N/A		□ Add
			□ Remove
			Change
	N/A		Add
			Remove
			Change

). If am · ·	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	-N/A
	<u> </u>
	<u> </u>
(If an e Note:	tive date, if other than the date of filing:  (optional)  (fective 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: a 90th day after the record is filed.
Dated	August 20th 2019
	Signature of a member or authorized epresentative of a member
	Meguel taban Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00