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| (Requestor's Name)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  ertified Copies Certificates of Status Special Instructions to Filing Officer: |                   |             |  |
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2017 DEC 22 PM 5: 15
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## **COVER LETTER**

|                   | Registration S<br>Division of Co  |  |  |  |
|-------------------|---|--|--|--|
| CHD ICC           |   | Tiles, LLC                                       |  |  |
| SUBJEC            | Division of Corporations  Modomo Tiles, LLC  Name of Limited Liability Company  nelosed Articles of Amendment and fee(s) are submitted for filing.  return all correspondence concerning this matter to the following:  Richard A.C. Alton, Esq.  Name of Person  Silverberg & Weiss, P.A.  Firm/Company  1290 Weston Road, Suite 218  Address  Weston, Florida  City/State and Zip Code  ralton@pkslegal.com  B-mail address: (to be used for future annual report notification)  rther information concerning this matter, please call:  rd A.C. Alton, Esq.  Name of Person  Name of Person  Name of Person  Silverberg & Weiss, P.A.  Firm/Company  1290 Weston Road, Suite 218  Address  Weston, Florida  City/State and Zip Code  ralton@pkslegal.com  B-mail address: (to be used for future annual report notification)  rther information concerning this matter, please call:  rd A.C. Alton, Esq.  Name of Person  Name of Person  Silverberg & Weiss, P.A.  The firm/Company  1290 Weston Road, Suite 218  Address  Daytime Telephone Number  Silverberg & Weiss, P.A.  Certificate of Status & Certificate of Status |  |  |  |
|                   |   |  |  |  |
| The enclo         | sed Articles o  | f Amendment and fee(s) are sub                   | omitted for filing.  |  |
| Please ret        | urn all corresp   | ondence concerning this matter                   | to the following:  |  |
|                   |   | Richard A.C. Alton, Esq.                         | Address  City/State and Zip Code  gal.com  -mail address: (to be used for future annual report notification)  atter. please call:  255.00 Filing Fee & \$\$55.00 Filing Fee & \$\$560.00 Filing Fee, |  |
|                   |   | <del></del>                                      | Name of Person   |  |
|                   |   | Silverberg & Weiss, P.A.                         |  |  |
|                   |   |  | Firm/Company   |  |
|                   |   | Firm/Company 1290 Weston Road, Suite 218 Address |  |  |
|                   |   |  | Address  |  |
|                   |   | Weston, Florida                                  |  |  |
|                   |   |  | City/State and Zip Code  |  |
|                   |   | <del></del>                                      |  | <del></del>                            |
|                   |   | E-mail address: (                                | to be used for future annual report notifi   | cation)                                |
| For furthe        | r information o   | concerning this matter, please co                | ali:   |  |
| Richard A         | .C. Alton, Esq  |  | 954 3840998<br>at ( )  |  |
|                   | Name o  | of Person  | Area Code Daytime  | Telephone Number                       |
|                   |   |  |  |  |
| Enclosed i        | s a check for th  | he following amount:                             |  |  |
| □ <b>\$</b> 25.00 | Filing Fee  | ==-  | Certified Copy   | Certificate of Status & Certified Copy |

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

2017 DEC 22 PM 5: 15

TALLAHARSEE, FLORIDA

Modomo Tiles, LLC

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

(A Florida Limited Liability Company)

|  |  | .07  |
|--|--|--|
| The Articles of Organization for this Limited Liability Company  | were filed on 05/12/2017   | and assigned                                   |
| Florida document number L17000106408   |  |  |
|  |  |  |
| This amendment is submitted to amend the following:  |  |  |
| A. If amending name, enter the new name of the limited liab  | llity company here:  |  |
|  |  | ·  |
| The new name must be distinguishable and contain the words "Limited Liabil   | ity Company," the designation "LLC" or th                                | e 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)   |  |  |
|  |  |  |
| D to D d to b and add a section of the section of t | C., udd on our manado ant  | ton the name of the name                       |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here   |  | er the name of the new                         |
|  |  |  |
| Name of New Registered Agent:  |  |  |
|  |  |  |
| New Registered Office Address:   | Enter Florida street address   |  |
|  | Florida  |  |
|  | , Florida  | Zip Code                                       |
| New Registered Agent's Signature, if changing Registered Agent:  |  |  |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of   | performance of my duties, and I at<br>rovided for in Chapter 605, F.S. C | m familiar with and<br>Or, if this document is |
| 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> Name</u> |               | Address                 | Type of Action                                       |  |  |
|--------------|---------------|-------------------------|--|--|--|
| MGR          | Alpert, Scott | 6020 NW 61st Manor      | □ Add  |  |  |
|              |               | Parkiand, Florida 33067 |  |  |  |
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| fective date, if other than the d   | ata of filing                     |                                    |            |                                       | (option:        | A)                  |                 |
| ne effective date is listed, the date must be to the content of the date inserted in this blocument's effective date on the Dept. | e specific and o<br>k does not me | cannot be prior<br>cet the applica |            |                                       | days after fili | ng.) Pursuant to 60 |                 |
| record specifies a delayed<br>The 90th day after the reco   |                                   | ate, but no                        | an effecti | ve time, at                           | 12:01 a.n       | n. on the earl      | ier of          |
| November 21   |                                   | 2017                               |            |                                       |                 |                     | •               |
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|   |                                   | ember or autho                     |            |                                       |                 |                     |                 |

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Filing Fee: \$25.00