## 117000139042

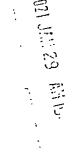
| (Reques                        | tor's Name)     |        |
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| PICK-UP                        | WAIT            | MAIL   |
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| Certified Copies               | Certificates of | Status |
| Special Instructions to Filing | Officer:        |        |
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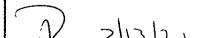
Office Use Only



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## **COVER LETTER**

| O: Registration S<br>Division of Co |   |   |  |
|-------------------------------------|---|---|--|
| OT IN THE ZWE                       | IB FL   | OORING LLC  |  |
| SUBJECT:                            | Name of Lir                                     | nited Liabibty Company  |  |
| The enclosed Articles of            | Amendment and fee(s) are sul                    | omitted for filing.   |  |
| Please return all corresp           | ondence concerning this matter                  | to the following:   |  |
|                                     |   | IGOR G BARBOSA  |  |
|                                     |   | Name of Person  |  |
|                                     |   | Firm/Company  |  |
|                                     |   | 20W AUDREY DRIVE  |  |
|                                     |   | Address   |  |
|                                     | FORT WA   | LTON BEACH, FLORIDA 32548   | :<br>  |
|                                     |   | City/State and Zip Code   |  |
|                                     | IGORBARBOSAUSA@O                                | UTLOOOK.COM  to be used for future annual report not                      | ification)   |
| For further information c           | concerning this matter, please c                |   |  |
| IGOR G BARBOSA                      |   | 850 428-0909  |  |
| Name o                              | f Person  | Area Code Daytin  | ne Felephone Number  |
| Inclosed is a check for the         | re following amount:                            |   |  |
| ■ \$25.00 Filing Fee                | □ \$30.00 Filing Fee &<br>Certificate of Status | □ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | C3 \$60.00 Filing Fee.<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
| Mailing Addres Registration S       | <del></del>                                     | <u>Street Address:</u><br>Registration Se                                 | vetian   |
| Division of C                       |   | Registration Se<br>Division of Col  |  |
| P.O. Box 632                        | -   | The Centre of   |  |
| Tallahassee, I                      | <sup>2</sup> L 32314                            | 2415 N. Monro   | e Street, Suite 810  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| IB FLOORING  | G LLC  |                      |
|--|--|----------------------|
| (Name of the Limited Liability Compa<br>(A Florida Limited   | iny as it now appears on our records.)<br>Liability Company) |                      |
| The Articles of Organization for this Limited Liability Company Florida document number 1.17000139042  | were filed on <u>06/27/2017</u>                              | and assigned         |
| 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 "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  FORT WALTON BEACH  FLORIDA 32548 |  |                      |
| The new name must be distinguishable and contain the words "Limited Liabi  | lity Company," the designation "LLC" or the a                | bbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  | 20W AUDREY DRIVE   |                      |
| (Principal office address MUST BE A STREET ADDRESS)  | FORT WALTON BEACH  |                      |
|  | FLORIDA 32548  |                      |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |  |                      |
|  |  | 702                  |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  | address on our records, <u>enter the na</u> r                | 29                   |
| Name of New Registered Agent:  |  |                      |
| New Registered Office Address:   | Enter Florida street address                                 | <u> </u>             |
|  | Florida  |                      |
|  | City   | Zıp 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

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

JR = Manager JBR = Authorized Member

| ale  | Name                  | Address           | Type of Action |
|------|-----------------------|-------------------|----------------|
| AMBR | JOAO BATISTA DA SILVA | 20 W AUDREY DRIVE | <b>≣</b> Add   |
|      |                       | FORT WALTON BEACH | ElRemove       |
|      |                       | FLORIDA 32548     |                |
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| Offective date, if other than the   | 01/26/2021   | (  | antional)                          |
| f an effective date is listed, the date municipal of the date inserted in this bedocument's effective date on the I | ast be specific and cannot be prior to<br>block does not meet the applical | date of filing or more than 90 days          | after filing.) Pursuant to 605,020 |
|   |  | ne, at 12:01 a.m. on the earlier (           | of: (b) The 90th day after the     |
|   | ve date, but not an effective tin  |  |                                    |
| record specifies a delayed effecti<br>ed is filed.  | ve date, but not an effective tim 2021                                     |  |                                    |
| rd is filed.  | 2021   | _·   |                                    |
| rd is filed.  | 2021   | -·<br>30 <i>54</i>                           |                                    |
| rd is filed.  |  | SOSA<br>ized representative of a member      |                                    |

Filing Fee: \$25.00