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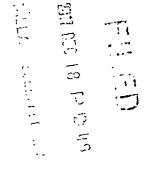
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D. SCOTT DEC 1 9 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: L+V Elite Flooring 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:
Elizabeth Childers Name of Person
L+V Elite Flooring LLL Firm/Company
304 Gardens Dr Apt 104
Pompono Beach FL 33069 City/State and Zip Code 112 Childers 17 @ yahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: E1172beth Childers at (754) 235-3882- 27 Name of Person Area Code Daytime Telephone Number 27 Enclosed is a check for the following amount:
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$25.00 Filing Fee & \$30.00 Filing Fee & Certificate of Status 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

(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)		_
(A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on Prug	25, 201	and	assigned
Florida document number <u>Li700018208</u>	·		
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	bbreviation	"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 registered agent and/or the new registered office address here:	cords, <u>ente</u>	the nan	ne of the new
Name of New Registered Agent:			
New Registered Office Address:	:	<u> </u>	
New Registered Office Address: Enter Florida street	address	-ران	·:
	Florida _	Zip Co	3
City	••	Zip Co	de
New Registered Agent's Signature, if changing Registered Agent:	t**	. ;	-
I hereby accept the appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete performance of my duti accept the obligations of my position as registered agent as provided for in Chapter being filed to merely reflect a change in the registered office address, I hereby confinempany has been notified in writing of this change.	es, and I am 605, F.S. Or	familiàr , if this do	with and ocument is

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>	Name	Address	Type of Action
Treasurer	Vincent Ramirez	304 Gardens Dr # 104	Add
		Pompano Beach FL 3306	<u> </u>
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			Remove
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			Remove
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ective date is listed, the date must be specific and callf the date inserted in this block does not mee				
ent's effective date on the Department of Stat	e's records.			
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ord specifies a delayed effective dat 90th day after the record is filed.	e, but not an em	ective time, a	t 12:01 a.m.	on the earl
December, 12.	2017			
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Page 3 of 3

Filing Fee: \$25.00