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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

# **COVER LETTER**

	ration Section on of Corporations
SUBJECT: _	HUXUTY Tile by Mihai, 44C  Name of Limited Liability Company
The enclosed A	rticles of Amendment and fee(s) are submitted for filing.
Please return al	l correspondence concerning this matter to the following:
	Mihai Vrancean Name of Person
	Luxury Tile by Mihai, LhC
	87 Bay Tree Drive
	Miramar Beach, FP, 32550  City/State and Zip Code  mihai.vrancean@gmail.com  E-mail address: (to be used for future abdual report notification)
	mihai. Vrancean@gmail. com  E-mail address: (to be used for future about report notification)
For further info	rmation concerning this matter, please call:
Miho	Name of Person at (850) 974 - 8661  Area Code Daytime Telephone Number
Enclosed is a ch	neck for the following amount:
\$25.00 Filin	rig Fee Solution Status Solution Solution Status Solution Status Solution Status Solution Status Solution Status Solution Status Solution Solution Status Solu

#### 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

Luxury Tile	e by Mihai, 44C
(Name of the Limited Liab) (A Flori	illity Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 118000 33109.5	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lir	mited liability company here:
Same	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Same
(Principal office address MUST BE A STREET ADD	ORESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad  Name of New Registered Agent:	gistered office address on our records, enter the name of the new ddress here:
New Registered Office Address:	
· 	Enter Florida street address
•	City Zip 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.

S'ame 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 = Ms $AMBR = At$	anager` uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Mihail Chirilenco	12636 NF 144TH ST APT Dai Kirkland wa 98034-1585	<u>0</u>
		,	□ Remove
			Change
AMBR	Vergiliu Lazor	995 Airport Rd Apt , 522 Destin, Fe 32541-1849	<b>b</b> Add
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ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m ne 90th day after the record is filed.	n. on the ea
d 3 march 18	
Signature of a member or authorized representative of a member	······································

Page 3 of 3

Filing Fee: \$25.00