118000145893

(F	Requestor's Name)
(F	Address)
	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(E	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:





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COVER LETTER

Divisi	on of Corp	orations		
T SUBJECT: _		larble & Granite LLC		
SOBJECT: _		Name of Lim	ited Liability Company	
The enclosed A	Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return al	ll correspon	dence concerning this matter	to the following:	
		Muhterem Tasdemir		
			Name of Person	
		Tasdemir Marble & Granite	e Lt.C	
			Firm/Company	
		5597 Seminary Road APT	602S	
			Address	
		Falls Church/VA/22041		
		pakmotiv@hotmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further info	ormation co	ncerning this matter, please ca	aff:	
Saban Tasde	mir		703 310-7174	
	Name of	Person	Area Code Daytimo	e Telephone Number
Enclosed is a c	heck for the	following amount:		
■ \$25.00 Fiti	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Tasdemir Marble & Granite LL0		
(Name of the Lim	<u>ited Liability Company as it now appears of</u> (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited I Florida document number L18000145893	Liability Company were filed on $\frac{6/13/2}{2}$.	2018 and assigned
This amendment is submitted to amend the fol	Howing:	
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 desig	mation "LEC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		a ∀ s
		SE SIG
Enter new mailing address, if applicable:		P 487 2 2 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
(Mailing address MAY BE A POST OFFICE	<u>: BOX)</u>	
		<u> </u>
		0
B. If amending the registered agent and registered agent and/or the new registered of		~ ` `
Name of New Registered Agent:	Muhterem Tasdemir	
New Registered Office Address:		
	Enter Florida	street address
		Florido
	City	, Florida

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

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	Faruk Tasdemir	2800 Park Avenue	
		Sanford, FL 32773	
			■ Remove
		2800 Park Avenue	Remove
			☐ Change
MGR	Muhterem Tasdemir	Sanford, FL 32773	
			
			☐ Remove
			
			U Change
			Add
			□ Remove
			Change
			□ Remove
			Change
			☐ Remove
			□ Change
			Remove
			☐ Change

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		SEP SIGN
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		12: (
		02
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and can Note: If the date inserted in this block does not mee document's effective date on the Department of State	or be prior to date of filing or more than 90 days a the applicable statutory filing requirements,	
If the record specifies a delayed effective dat (b) The 90th day after the record is filed.	, but not an effective time, at 12:0:	1 a.m. on the earlier
Dated	00	
	per or authorized representative of a member	

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Filing Fee: \$25.00