L18000164855

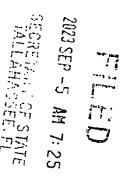
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Incorrect-Form





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SEP 1 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CARPET INSTALLATIONS BY GIOLLUM 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:
Moises Zodziauez Name of Person
CARPET INSTALLATIONS BY GIO LLC
4100 N. POWERLINE Rd Suite O4
Pompano BEACL F1. 33073 City/State and Zip Code
Admin @ CAROCH INSTAll AdioNSBy Gio. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Moises 2012: QUEZ at (646) 210-6220 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TICLES OF ORGANIZATION
OF

-AILATION SUPPLIED

AND LL COMPANY AS IT NOW appears on our records.)

(A Florida Limited Liability Company)

ALLANICOF STATE

CARPEL TWS+A11A (Name of the Limited Lia (A Flo	tions By Gio	LLC -5 AH 7:5
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our rida Limited Liability Company)	LLC SEP-5 AH 7: 2 records.) GEORGIAR OF STATE and assigned F. Fl.
The Articles of Organization for this Limited Liability	• •	and assigned, FI.
Florida document number <u>L 1800016</u>	<u>48</u> 55	
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words	Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address her		enter the name of the new registered
Name of New Registered Agent:	 	
New Registered Office Address:		
	Enter Florida street	address
_		, Florida
	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.

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>	<u>Name</u>	Address	Type of Action
MGR	SOOVAN: Alvarado	6824 NW 33 TEZZACE FORT LANDERNALE, FI. 33309	□Add
		FORT LANDERUATE, F1.	Remove
		33309	□Change
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te: If the date	f other than the date s listed, the date must be sp inserted in this block do tive date on the Departn	oes not meet the ap	pplicable statutor	ng or more than 90 y filing requirem	days after filing.) Pents, this date wi	ursuant to 605.020 Il not be listed as
cord specifies s filed.	a delayed effective date	, but not an effect	ive time, at 12:01	a.m. on the earl	ier of: (b) The S	00th day after the
ed 8/20	1/2023					
- , -		20				
-	Signa	ture of a member or	authorized represe	ntative of a member	<u></u>	
		(\	-			

Filing Fee: \$25.00



August 15, 2023

MOISES RODRIGUEZ 4100 N. POWERLINE RD STE O 4-5 POMPANO BEACH, FL 33073

SUBJECT: CARPET INSTALLATIONS BY GIO LLC

Ref. Number: L18000164855

We have received your document for CARPET INSTALLATIONS BY GIO LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

EC = 0 5 2023

Letter Number: 423A00018630