## 49000/00043

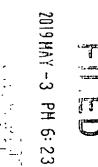
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:





200328408012

05/06/19--01023--010 ★\*35.00



C. GOLDEN MAY 1 6 2019

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: B+	5 Flooring LLC Name of Limit	ed Liability Company	
	mendment and fee(s) are subn		
	-Judith	Rame of Person	· · · · · · · · · · · · · · · · · · ·
	<u> </u>	flooring Lys	
	1080 Bic	Hara Blud Address	·
		City/State and Zip Code  - Flooring & Yourgo be used for future annual report notifi	
For further information co	ncerning this matter, please ca		<b>V</b>
Name of	Person Person	at ( <u>352) 470 ~ {</u> Area Code Daytime	3652 Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing 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:

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

FILED

2019 MAY -3 PM 6: 23

B+5 flooring CC	<u> </u>	
( <u>Name of the Limited Embility</u> ) (A Florida Li	Company as it now appears on our records.) imited Liability Company)	HA coin, fill
The Articles of Organization for this Limited Liability Con	mpany were filed on <u>4-11-19</u>	and assigned
Florida document number 49000 / 000 43		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRES	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, <u>er</u> ss here:	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid:	Zip Code
Now Begietand Agent's Cineston of the give Decision of A	Caty	г.ф. Соис

## 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 Title Name | Address Type of Action Judith Bootraright **⊟**-∧dd 32159 □ Remove \_□ Change □ Add ☐ Remove ☐ Change \_□ Add ■ Remove \_\_ Change \_□ Add □ Remove \_ Change □ Add ☐ Remove \_ Change □ Add ☐ Remove

\_□ Change

-	
ote: If	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a effective date on the Department of State's records.
recor The 90	specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of day after the record is filed.
ted	·
ted	Juddle Greater H Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00