Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Contact@medeirossouza.com

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### WM FLOORING LLC

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OF AMILY SEE, FLORIDA

2021 DEC 20 AM 10: 5

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Corporate Filing Menu

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#### **COVER LETTER**

TO: Registration Sec Division of Corp				
WM FLOOI	RING ELC			
SUBJECT:	Name of Limit	ed Liability Company	<del></del>	
	Amendment and fee(s) are sub-			
Please return all correspon	ndence concerning this matter t	o the following:		
	Ruhem Souza			
		Name of Person		
	MEDEIROS SOUZA COR	Р		
Firm/Company				
	845 N GARLAND AVE, S	TE 100		
		Address	<del></del>	
	ORLANDO, FL 32801			
		City/State and Zip Code		
	contact@medeirossouza.cor	n to be used for future annual report notifica	ation)	
For further information of	oncerning this matter, please of			
Rubem Souza		407 326-8484		
Name	f Person	Area Code Daytime 1	elephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

MailingAddress: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

StreetAddress:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## From: RUBEM SOU

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

he Articles of Organization for this Limited Li lorida document number 1.19000177082	iability Company were filed on 07/09/2019	and assigned
his amendment is submitted to amend the follo	owing:	
. If amending name, enter the new name of	f the limited liability company here:	
VM HOMES REMODELING LLC		
he new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applic	eable:	
Principal office address MUST BE A STREE		
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or i	registered office address on our records	s, enter the name of the new regist
gent and/or the new registered office addre	ss nere:	7A. S
Name of New Registered Agent:	MEDEIROS SOUZA CORP	21 22 23 24 24
New Registered Office Address:	845 N GARLAND AVE, STE 100	FIL YASS
New Registered Office / Idahesia.	Enter Florida stre	retaddress
	ORLANDO	Florida 32801 5
New Registered Agent's Signature, if changing	City: Registered Agent:	07 15 15 15 15 15 15 15 15 15 15 15 15 15
	ed agent and agree to act in this capac	to the order or many to comply with

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.

MGR = Manager

From: RUBEM SOU 2021-12-20 15:44:17 GMT 14076046519 To: ~18506176383 Page: 6 of 7

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Change
			□Remove
			□Change
			□ Add
			□Remove
			Change
			Remove
			□ Change
			□Add
			Change

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Note: If the date inse	erted in this block does no date on the Department o	f State's records.				
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