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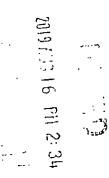
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### **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	BLS Floorina	LLC	
	Name of Lir	LLC nited Liability Company	<del></del>
The enclosed Articles o	l'Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Brando	on L. Stockmay	
	BLS F	700rih g LLC Firm/Company	
		S Ave. Address	
		City/State and Zip Code  Stockmar & Yaha  (to be used for future annual report notif	
	Brandon E-mail address:	Stockmar Qyaho	co.Com
For further information of	concerning this matter, please c		
Brandon S	Stockmar	at ( <u>380</u> ) <u>479</u> Area Code Daytime	-2565
Name o	of Person	Area Code Daytime	Telephone 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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

. 1

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

# TO ARTICLES OF ORGANIZATION OF



BLS Poon?  (Name of the Limited Liability (A Florida)	nguc	<b>2019</b> ADD 1	16 PM 2:34
( <u>Name of the Limited Liabili</u> (A Floridi	ity Company as it now appe a Limited Liability Company	ars on our records.)	· .
The Articles of Organization for this Limited Liability C	Company were filed on _		and assigned
	<u> </u>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company l	nere:	
The Flooring Guys of Cer	rtral Florida	. LLC	
The new name must be distinguishable and contain the words "Lim	rited Liability Company," the	designation "LLC" or the al	bhreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>		
		<u>-</u>	· · · · ·
		<del></del>	
B. If amending the registered agent and/or regis	stered office address o	п our records, <u>enter</u>	the name of the nev
registered agent and/or the new registered office add	ress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	orida street address	
		Florida	Zip Code
	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.

## or removed from our records:

### MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
		<del>.</del>	Remove
			Change
			□ Remove
			Change
			Remove
			Change
			Remove
			Remove
			Change
			Remove
			□ Change

E. Effective date, if other than the date of filing (lift an effective 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 605,0207 (3 Note: If the date inserted in this block does not prove the applicable steamers of live and the lift of the date inserted in this block does not prove the applicable steamers.
2. The date inserted in this clock does not filed the applicable visibility filing requirements, this date will not be listed as the
document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
(b) The source are record is filed.
Dated <u>August 2</u> 2019
Dated 174943( 2
Duch tellum
Signature of a member or authorized representative of a member
Phone day Shaller
Brandon Stockmar Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00