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C Kinsey

COVER LETTER

TO: Registration Section Division of Corpora					
	ATH CARPET & TILE CL	EANING, LLC			
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of Ame	endment and fee(s) are subt	mitted for filing.			
Please return all corresponder	nce concerning this matter	to the following:			
		DEMETRIUS DAVIS			
- -		Name of Person			
	GOLIATI	H CARPET & TILE CLEANING, L	LC		
•		Firm/Company			
4121 DIJON DRIVE					
•	_	Address			
		ORLANDO, FL 32808			
•		City/State and Zip Code goliathcarpeting@gmail.com			
_	E-mail address: (to be used for future annual report notific	ation)		
For further information conce	erning this matter, please ca	all:			
DEMETRIUS DAVIS		407 848-9567			
Name of Per	son	Area Code Daytime	Telephone Number		
Enclosed is a check for the fo	ollowing 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

GOLIATH CARPET & 7	TILE CLEANING, L	.LC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears of Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL19000235222	were filed on	09/17/2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	<u>2</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the des	ignation "ELC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			-
(Principal office address MUST BE A STREET ADDRESS)			20 19 ——
Enter new mailing address, if applicable: (Mailing uddress MAY BE A POST OFFICE BOX)			FILED DIC 12- PH 2:
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter	the name of the
Name of New Registered Agent:			
Name Design and Office Address.			
New Registered Office Address:	Enter Florid	a 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>	<u>Address</u>	Type of Action
AMBR	DEMETRIUS DAVIS		Add
			☐ Remove
		4121 DIJON DRIVE ORLANDO, FL 32808	
MGR	DEMETRIUS DAVIS		
			Remove
		4121 DIJON DRIVE ORLANDO, FL 32808	
MBR	DAKARI DAVIS	<u></u>	Add
		THE PROPERTY OF THE PROPERTY O	Remove
		4121 DIJON DRIVE ORLANDO, FL 32808	☐ Change
			Add
			□ Remove
			Change
			Add
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ective date, if other than the d	ate of filing: 09/17/20	19	(optiona	l)
effective date is listed, the date must be te: If the date inserted in this blockument's effective date on the Dep	se specific and cannot be pr k does not meet the app	ior to date of filing or a licable statutory filia	nore than 90 days after filir	g.) Pursuant to 605.020
record specifies a delayed of the 90th day after the recor	effective date, but ordered is filed.	not an effective	time, at 12:01 a.m	, on the earlier c
ed NOVEMBER 1	2019	·		
	>	_		

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Filing Fee: \$25.00

Typed or printed name of signee