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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Nationwide: Floor Covering UC 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:
Mariono Rincon Name of Person
Firm/Company
2680 S6th Ave. NE
City/State and Zip Code City/State and Zip Code E-mail address: (to be used for former agricular report notification)
For further information concerning this matter, please call:
Name of Person at (636) 542-3524 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) ability Company)	ing LCC
The Articles of Organization for this Limited Liability Company w Florida document number <u>L 190002645</u> 84	i	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability Mobile Concrete Puno The new name must be distinguishable and contain the words "Limited Liability		LLC or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		20 m
		20 3 3
		Sec. 1 €
Enter new mailing address, if applicable:		(T) - 213m
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		e name of the new registere
	Enter Florida street address	
	, Flori	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a	erformance of my duties, and ovided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

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>	Name	<u>Address</u>	Type of Action
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