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| | egistration Se ivision of Cor | | | | |
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| CUBIECT | | & Stone LLC | | | |
| SUBJECT | : | Name of Lim | ited Liability Company | | |
| The enclose | ed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please retu | rn all correspo | indence concerning this matter | to the following: | | |
| | | Joshua Flowers | | | |
| | | | Name of Person | | |
| | | · | Firm Company | | |
| | | 1329 north shangri la drive | | | |
| | | | Address | | |
| | | Daytona Beach, Florida 32119 City/State and Zip Code | | | |
| | | | City/State and Zip Code | | |
| | | integrajosh@gmail.com | to be used for future annual report | natification) | |
| For further | information c | oncerning this matter, please c | | ionneuton) | |
| Joshua Flo | wers | | 386 5887693 at () | | |
| | Name o | f Person | Area Code Day | time Telephone Number | |
| Enclosed is | a check for th | ne 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) | |
| | ailing Addres | | Street Address Registration | | |
| | egistration S ivision of C | | Division of C | | |
| P | O. Box 632 | 7 | The Centre o | f Tallahassee | |
| T | allahassee, f | FL 32314 | 2415 N. Mor | rroe Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Integra Tile & Stone LLC | | | | | |
|---|--|--|--|--|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our records.) Liability Company) | | | | |
| The Articles of Organization for this Limited Liability Company Florida document number L20000099016 | were filed on April 08, 2020 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: | | | | |
| Daytona Tile Repair LLC | | | | | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LLC" or the abbreviation "L.L.C." | | | | |
| Enter new principal offices address, if applicable: | 1329 north shangri la drive | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | Daytona Beach, Florida 32119 | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1329 north shangri la drive Daytona Beach, Florida 32119 | | | | |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | | | | | |
| Name of New Registered Agent: | 2023 APR | | | | |
| New Registered Office Address: | Enter Florida street address , Florida | | | | |
| | City , Florida Zir 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 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> | Address | Type of Action |
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| n effective da o <mark>te:</mark> If the d | te is listed, the da ate inserted in t | n the date of filite must be specific a his block does no the Department o | and cannot be pri of meet the app | licable statutory | | | |
| ecord specif is filed. | ies a delayed ef | Tective date, but n | iot an effective | time, at 12:01 a | .m. on the earlie | er of: (b) The S | Oth day after the |
| ted | March | 27 | , 202 | 3 | | | |
| | | /////////////////////////////////////// | | | | | |
| _ | | Signature of | f a member or au | thorized represent | ative of a member | - | |