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A. BUTLER MAR 1 - 2022

COVER LETTER

TO: Registration S Division of Con		•	•
SUBJECT: FTP	Interior Rer	modeling LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Leon Alve	Name of Person	
	FTP Inter	Firm/Company	
	5446 Cha	ndler Dr. Address	
	Winter Have	City/State and Zip Code 70 gmail-cem to be used for future annual report notification.	
	leonjalvarez 8 E-mail address: (1	7@ gmail.com	fication)
For further information of	concerning this matter, please ca	ail:	
Leon Alvare	T	at (<u>863</u>) <u>399-2</u> Area Code Daytimo	157 Telephone Number
Enclosed is a check for t	he following amount:		
M \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 FEB 14 PM 12: 54

			2022 25		
FTP Interior (Name of the Limited I)	Liability Compar	eling LL(ny as it how appear iability Company)	SECRETA s on our records ILA	ARY OF STATE	
The Articles of Organization for this Limited Liabi	lity Company (were filed on	11-23-20	20 and assigne	d
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the Flooring & Tile De The new name must be distinguishable and contain the words				abbreviation "L.L.C."	
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A		2801 Winter	Whispering Haven, FL	Trails Dr 33884	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) <i>X</i>)	2801 -	Whispering Winter Hau		<u></u> > .
B. If amending the registered agent and/or regi	stered office a	ddress on our r	ecords, <u>enter the n</u>	ame of the new re	gistered
Name of New Registered Agent: New Registered Office Address:	Leor2801	Mhisper Enter Flor	ing Trail ?) <i>r.</i>	
	Winter	Haven	, Florida	33884 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

Title	Name	Address	Type of Action
MGR	Leon Alvarez	2801 Whispering Trails I) C. MAdd
			□Remove
			□Change
	F		□Add
			□Remove
		<u> </u>	□Change
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Note:	ive date, if other than the date of filing:
he recor ord is fi	d 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 led.
Dated	February 3 rd . 2022. Leon alwayed Signature of a number or authorized representative of a member
	Lean alleraries
	Signature of a nlember or authorized representative of a member
	Leon Alvarez Typed or printed name of signee
	Leon Almiel