

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000730933)))



H220000730933ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

50		To.	Division of Cor Fax Number			22		
022 FEB 25 AH 9: 5	t dia servicem	From:	Account Name Account Number Phone Fax Number	:	MEDETROS SOUZA 120190000068 (407)326-8484 (407)504-6519	CORP	FE8 25 TH 3: 00	

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EXQUISITE FLOORS LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

T. LEMIEUX FEB 28 2022



Electronic Filing Menu

Corporate Filing Menu

Help

TO:

Registration Section

COVER LETTER

Div	ision of Corp	porations		
orin moon	EXQUISITI	E FLOORS LLC		
SUBJECT		Name of Limi	ited Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return	i all correspoi	ndence concerning this matter	to the following:	
		Rubem Souza		
			Name of Person	
		MEDEIROS SOUZA COR	יוא	
Firm/Company				
845 N GARLAND AVE, STE 100				
		<u> </u>	Address	
		ORLANDO, FL 32801		
			City/State and Zip Code	
		contact@medeirossouza.com		
			to be used for future annual report notificat	ion)
For further i	nformation co	oncerning this matter, please of	all:	
Rubem Sou	za		at () 326-8484 Area Code Daytime Fe	
	Name of	f Person	Area Code Daytime Fe	lephone Number
Enclosed is	a check for th	ne following amount:		
□ \$25.00 °	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	(1 \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Ma</u>	ailingAddres	<u>s:</u>	StreetAddress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Page: 6 of 8

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ited Liability Company as it now annears on or (A Florida Limited Liability Company)	ir records.)
	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited I	Liability Company were filed on 02/03/20	21 and assigned
Torida document number1.21000035690	·	
This amendment is submitted to amend the fol	Howing:	
A. If amending name, enter the new name	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE		
Enter new mailing address, if applicable:		
••	E BOX)	22
	E BOX)	
Mailing address MAY BE A POST OFFICI		
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our record	s, enter the name of the new regis
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our record	s, enter the name of the new regis
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our record	s, enter the name of the new regis
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our record ress here: MEDEIROS SOUZA CORP 845 N GARLAND AVE, STE 100	s, enter the name of the new regis
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on our record ress here: MEDEIROS SOUZA CORP 845 N GARLAND AVE, STE 100 Enter Florida stre	s, enter the name of the new regis
	registered office address on our record ress here: MEDEIROS SOUZA CORP 845 N GARLAND AVE, STE 100	s, enter the name of the new regis

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.

To: -18506176383 • Page: 7 of 8 2022-02-25 04:45:57 GMT 14076046519 From: RUBEM SOUZA

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
AMBR	Carolina Smith	455 WESTPOINT GARDEN CIRCLE	= Add
		WINTER GARDEN, FL 34787	□Remove
			□ Change
			□Add
		 	□Remove
			□Change
			🗆 Add
			□ Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Reniove
			□ Change

From: RUBEM SOUZA

				
				<u>.</u>
				
<u> </u>				
			<u> </u>	
				
_				
				
Effective date, if other than the date in an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	does not meet the appli	cable statutory filing requ	iirements, this date wi	arsuant to 605,0207 II not be fisted as
e record specifies a delayed effective dans tiled	ate, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 9	Oth day after the
ORI ANDO	02,24,2023	!		
Dated		·		
	`			
Dated ORLANDO Signature Si	nature of a member or auth	norized representative of a m	nember	