

L21000149422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

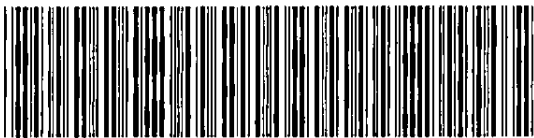
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100439052551

100439052551
11/21/24--01001--005 **30.00

2024 NOV 20 PM 4:27
FILING
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bucklin Flooring and More LLC
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:

Samuel Isaiah Bucklin
Name of Person

Bucklin Flooring and More LLC
Firm/Company

181 Curtis Mill Road
Address

Monticello, FL 32344
City/State and Zip Code

Isaiah bucklin 81@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samuel Bucklin at (850) 999-3657
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following 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 Address:

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

2024 NOV 20 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Bucklin Flooring and More LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L21006149422

This amendment is submitted to amend the following:

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida
City

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

2024 NOV 20 PM 4:35
RECEIVED
TALLAHASSEE
STATE
OFFICE
FL

FILED

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>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

MGR	Josiah J. Bucklin
-----	-------------------

181 Curtis Mill Road Monticello, FL
--

<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

<input type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

<input type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

<input type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

<input type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

<input type="checkbox"/> Add

<input type="checkbox"/> Remove

<input type="checkbox"/> Change

2028 NOV 20 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated November 20, 2024

Samuel Bucklin

Typed or printed name of signee

FILED
2024 NOV 20 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FL
the 20th day of November the

Filing Fee: \$25.00