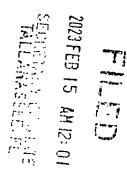
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. (Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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623

Office Use Only









October 19, 2022

TAYLOR DREW SR 748 COSTA LANE DEBARY, FL 32713

SUBJECT: SHAMROCK TILE LLC

Ref. Number: L22000024922

2023 FEB 15 AH 12: C

We have received your document for SHAMROCK TILE LLC and your check(s) ⊆ totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall OPS Clerk

Letter Number: 122A00023447

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Corp	orations			
SUBJECT:	Shamoul Name of Li	imited Liability Company		
		• , •		
The enclosed Articles of A	mendment and fee(s) are su	ubmitted for filing.		
Please return all correspond	dence concerning this matte	er to the following:		
		Whor Drew Sr. Name of Person		
	_	Name of Cason		
	Sho	Firm/Company	<u>C</u>	
	74	18 Costa Lare	<u>عالم</u> حصات	2023
		Address		3 FE
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	totre	2W 23236Jamail-1	com A	= C
	E-mail address	: (to be used for future annual report notif	ication)	;; 0
For further information cor	ncerning this matter, please	call:	in)	<del></del>
Datesho	Drew	at (319) 804	-5719	
Name of I	<sup>2</sup> erson	Area Code Daytime	c Telephone Number	
Enclosed is a check for the	following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,	
/ Sand Timing To	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Stat Certified Copy (additional copy is en-	tus &
Mailing Address:		Street Address:		
Registration Section Division of Corporations		Registration Sec		
P.O. Box 6327		Division of Cor The Centre of T		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shamrax	Tile LLC
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number <u>LJJ-DDDDJL197</u>	mpany were filed on \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE	<u>(SS)</u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	TEB 15 AH
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	City 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 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

Address

CED Taylor Drew Sr 748 Costa Ln DeBary, FL XIAdd

MBR

Owner

AMBR Remove DaTesha Drew 748 Costa Cane Desay, FC □Remove □Change □Remove □Add □ Remove \_\_ Change □Add □ Remove \_\_\_\_ Change

	· 120	ion, enter change	(s) here: (Attac	_		essary.)	
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			or printed name of	<u> ۱۲۷</u>			