## L2200360232

(Requestor's Name)	—
(Address)	
(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: J. HORNE SEP 20 2022	

Office Use Only

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CINCENSION CONTRACTOR

ه م <sup>ر د</sup> ه	C	COVER LETTER	
TO: Registration Se Division of Cor		· ·	
SUBJECT:B	16 TIME FLOOP Name of Limit	RING & More, L ed Liability Company	<u> </u>
The enclosed Articles of .	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	ATHENA	ALFORD.	
		Name of Person	
		Firm/Company	······································
	6969 PLA	YPARK TRAIL	
		City/State and Zip Code	
	-atheat E-mail address: (ite	Bigtime Flooring	and more @ gmail.com.
For further information co	oncerning this matter, please cal	1:	
5/1	A A.	at ()	
Name of	Pérson	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
¶ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	<ul> <li>S55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S Division of C	Section	<u>Street Address:</u> Registration Sec Division of Corp	
P.O. Box 632 Tallahassee, F	7	The Centre of T	

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

ARTICLES OF AM	MENDMENT	
ТО		
ARTICLES OF OR		
OF	10	
BIG TIME FLOOR (Name of the Limited Liability Company a (A Florida Limited Liability Company were Florida document number <u>L22006360232</u> ) This amendment is submitted to amend the following:	re filed on <u>8/16/2022</u> and assigned P	0
A. If amending name, <u>enter the new name of the limited liability</u>	company here:	
The new name must be distinguishable and contain the words "Limited Liability C	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 add agent and/or the new registered office address here:	ress on our records, <u>enter the name of the new registered</u>	
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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR =' Authorized Member

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Title	Name , Sk.	Address	Type of Action
MGR	Name JERMAINE MONLYNJ	1110 W. 28th ST.	🗆 Add
		Jacksonville, FL 32209	Remove
	(NO 5R)		□Change
MGR	(NO SR) JERMAINE MONLYN	1926 Jammes Rd	L'Add
		Jacksonville, FL 32210	□Remove
			Change
CED.	ATHENA ALFORD.	6969 PLAYPARK TRAIL	
		Jacksonville, FL 32	$Z_{1}^{\text{D}}$ Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
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## D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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.

If the record 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 record is filed. , .

September 20
Dated - 8/20 2022
Signature of a member or authorized representative of a member
ATHENA ALFORD.
Typed or printed pame of signee

Filing Fee: \$25.00