# L23000390286

Office Use Only



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### September 5th, 2023

To whomever it may concern,

We are writing this letter to inform you that we, Janser Reyes and Yeynel Reyes, have agreed to remove Yeynel Reyes from Reyes Flooring Crafts LLC as an Authorized Person. He has voluntarily chosen to leave the Limited Liability Company, however, Janser Reyes will continue to be the primary authorized representative of the company.

Attached with this letter is the amendment form for the Division of Corporations, alongside a check with the required \$25 for the filing fee.

If you have any questions feel free to contact us at the provided cell phone numbers. Thank you,

Sincerely,

239-222-7370

Heyes Janser 1230 gmail.com

STATE OF FLORIDA COUNTY OF LEE

Sworn and subscribed before me this  $\frac{9/7/23}{2}$  by Janser Reyes and Yeynel Reyes.

My Commission Expires: May 5 Commission Number: H H 84

Notary Public - State of Florida Commission # HH 349550 My Comm. Expires May 4, 2027 Bonded through National Notary Assn.

(SEAL)

Appeared before me by means of:

☐ Online Notarization

☐ Personally Know or

Produced ID

Type of ID FR Driv Lic.

# **COVER LETTER**

TO: Registration So Division of Cor			
REYES FE	OORING CRAFTS LLC		
TUBDEX.17	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JANSER REYES		
		Name of Person	
		Firm/Company	
	2906 11TH ST W		
	LEHIGH ACRES, FL, 33	Address 936	
	reyesjanser123@gmail.con	City/State and Zip Code	11
		to be used for future annual report notif	fication)
For further information e	concerning this matter, please c	all:	
JANSER REYES		239 222-7370 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he 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 Addres	ee•	Stroot Addroves	

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

## REYES FLOORING CRAFTS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Fanda I.)	anned rationity Company)		
The Articles of Organization for this Limited Liability Con	npany were filed on 08/17	/2023	and assigned
Florida document number L23000390286			<del>,</del>
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 desig	gnation "LLC" or the abl	breviation "E.I.,C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	Three address on our reco	· · · · · ·	
New Registered Office Address:			
	Enter Florida	street address	
	City	Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	iplete performance of my nt as provided for in Cha	duties, and Lam four opter 605, F.S. Or,	amiliar with and if this document is
			- •
i	If Changing Registered Agent.	Signature of New Reg	istored 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	YEYNEL REYES	2906 HTH ST W, LEHIGH ACRES FL 33971	□ Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
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ctive date if other t	han the date of filing:		(	optional)
effective date is listed, the <u>e:</u> If the date inserted i	date must be specific and cann	the applicable statuto	ing or more than 90 days	after filing.) Pursuant to 605.0. s. this date will not be listed
ord specifies a delayed	l effective date, but not an e	effective time, at 12:0	La.m. on the earlier c	of: (b) The 90th day after t
filed.	· content of anic, that in a		Tallic viii (iii carrier (	ii. (b) The 70th day after t
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ed 9-7-2	<del>=</del>	<del></del>		
ed <u>9-7-2</u>				<b>;</b>
ed <u>9-7-27</u>	Terre	ber or authorized repres		• •

Filing Fee: \$25.00