L23000462938

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer.	





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10/30/23--01020--012 **55.00



COVER LETTER

TO:	Registration Se Division of Cor		y	÷	•
CUBIC		LLC COMPANY			
SUBJECT:		Name of Limite	ed Liability Company		
The enc	losed Articles of	Amendment and fee(s) are subm	itted for filing.		
Please r	eturn all correspo	ndence concerning this matter to	the following:		
		FRANCISCO J. VELIZ P	ADILLA		
			Name of Person		
		FRANKIS LLC COMPA	NY		
			Firm/Company		
		12000 SCENIC HWY, A	PT 26		
			Address		
		PENSACOLA, FL 32514			
			City/State and Zip Code		<u></u>
		mariacalderonffgcpa@gmail.	com be used for future annual repe		
For furth	her information c	oncerning this matter, please call	·	ort nouncation)	l
FRAN	NCISCO J. VELIZ	Z PADILI.A	305 560-1	151	
	Name o	f Person		Daytime Teleph	none Number
Enclose	d is a check for th	ne following amount:			
□ \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		<u>Street Addr</u> Registratio		
Division of Corporations		Division of Corporations			
	P.O. Box 632 Tallahassee, F			e of Tallaha Iourge Stree	issee et. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRANKIS LLC COMPANY		
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our records.) ted Liability Company)	
he Articles of Organization for this Limited Liability Compa	my were filed on10/06/2023	and assigned
lorida document number L23000462938		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited l	iability company here:	
FRANKIS FLOORING OF PENSACOLA LLC		
he new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS,	N/A	
		- 22
		3
nter new mailing address, if applicable:	N/A	, · · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		<u>ග්</u>
		17.
3. If amending the registered agent and/or registered offic	ce address on our records, enter the	
gent and/or the new registered office address here:	et address on our records, emer the	name of the new registe
Name of New Registered Agent: N/A		
New Registered Office Address:		
-	Enter Florida street address	
	, Florid	la
	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, 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
	N/A	N/A	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Add
		<u>.</u>	□Remove
			□Change
			□Add
			□Remove
			□Change
	<u> </u>		
			□Remove
			Change

N/A					
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	10/16	2/2022			
ective date, if other than the defective date is listed, the date inust l	ate of filing:	3/2023	2	(optional)	(06.020**
e: If the date inserted in this bloc	k does not meet the	applicable statut	ory filing requiren	nents, this date will no	nt to 605.0207 1 be listed as
iment's effective date on the Dep	artment of State's re	ecords.			
ord specifies a delayed effective. filed.	date, but not an effe	ctive time, at 12:	01 a.m. on the ear	lier of: (b) The 90th	day after the
october 18	2023				
<u> </u>	16:	· ·			
_ froncisco	le iz				
ed OCTOBER 18 TONCISCO S	ignature of a member	or authorized repre	esentative of a memb	er	
FRANCISCO J. VELIZ					
		or printed name of			