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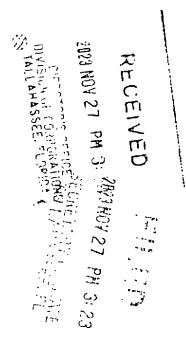
(Requestor's Name)
(,	Address)
(,	Address)
(4	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:

Office Use Only



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COVER LETTER

FO: Registration So Division of Cor				
	S COUNTERTOPS REFINISHI	NG LLC		
SUBJECT:	Name of Limit	ed Liability Company		
	Amendment and fee(s) are subm	-		
Please return all correspo	ondence concerning this matter to Cheyenne Moseley	o the following:		
		Name of Person	<u> </u>	
	Legalzoom.com, Inc.			
	101 N Brand Blvd 11th Fl	Firm/Company		7.023 NOY
	Glendale, CA 91203	Address		27
	bashemath1@gmail.com	City/State and Zip Code		PM 3: 23
For further information c	E-mail address: (to concerning this matter, please cal	be used for future annual report noting. !:	fication)	
Cheyenne Moseley		800 773-0888 at ()		
Name o	of Person	Area Code Daytim	e Telephone Number	~
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		Status &

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WALTONS COUNTERTOPS REI					
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>s.</u>)	_	
The Articles of Organization for this Limited Liability Company were filed on 10/26/2023 Ilorida document number L23000490726			_ and assigned		
his amendment is submitted to amend the foll	lowing:				
. If amending name, enter the new name o	f the limited liab	ility company here:			
Valton's Countertop Refinishing LLC					
he new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the designation "LLC"	or the abbre	viation "	L.L.C."
nter new principal offices address, if applic	cable:	1314 Lehigh Drive	1966 1-16	310	 • :
Principal office address MUST BE A STREE		Tallahassee, Florida 32301	23	2	- 18 B
				0	
				- نه د دې	ئے۔ اگر بہا
nter new mailing address, if applicable:		1314 Lehigh Drive	77 <u>7</u>	: 23 	
<u> Aailing address MAY BE A POST OFFICE</u>	BOX)	Tallahassee, Florida 32301			
. If amending the registered agent and egistered agent and/or the new registered o	or registered of ffice address here	2:	, enter the	e name	e of the
ivame of New Registered Agent:		·		_	
New Registered Office Address:	1314 Lehigh Di				
	T 11 1	Enter Florida street address			
	Tallahassee	, Flo	rida ³²³⁰¹		

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.

City

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>	Name	Address	Type of Action
AMBR	Shaneika Smith		
			□ Remove
		1314 Lehigh Drive Tallahassee, Florida 32301	Change
			
			🗖 Remove
			Change
			□ bbA
			Remove SECRE Change. ANA STORY Add THE STORY AND STORY ADDRESS A
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lf an eff <u>Note:</u>	ve date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or m If the date inserted in this block does not meet the applicable statutory filin ent's effective date on the Department of State's records.	ore than 90 days after filing.) Pursuant to g requirements, this date will not be l	605.0207 listed as
ne rec The	ord specifies a delayed effective date, but not an effective t 90th day after the record is filed.	ime, at 12:01 a.m. on the ea	rlier of
Dated _.	Signature of a member or authorized representative	of a member	
	Shaneika Smith		
	Suantika Siiirii		

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Filing Fee: \$25.00