

L23000515700

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ORLANDO EPOXY FLOOR SPECIALISTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICK CIANCHETTA

Name of Person

ORLANDO EPOXY FLOOR SPECIALISTS, LLC

Firm/Company

111 NORTH ORANGE AVENUE
SUITE 800 #741

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

PATRICK@MACHIEPOXY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK CIANCHETTA

Name of Person

at (813) 531 - 4635

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

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SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ORLANDO EPOXY FLOOR SPECIALISTS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on NOVEMBER 14, 2023 and assigned
Florida document number 123000515700.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

111 NORTH ORANGE AVENUE

SUITE 800 #741

ORLANDO, FLORIDA 32801

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

111 NORTH ORANGE AVENUE

SUITE 800 #741

ORLANDO, FLORIDA 32801

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Legalinc Corporate Services Inc.

New Registered Office Address:

476 Riverside Avenue

Enter Florida street address

Jacksonville

Florida

32202

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.

Erik Treutlein

Erik Treutlein, President on behalf of
Legalinc Corporate Services Inc.

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>	<u>Address</u>	<u>Type of Action</u>
AR	PATRICK CIANCHETTA	111 NORTH ORANGE AVENUE	<input type="checkbox"/> Add
		SUITE 800 #741	<input type="checkbox"/> Remove
		ORLANDO, FLORIDA 32801	<input checked="" type="checkbox"/> Change
MGR	PATRICK CIANCHETTA	111 NORTH ORANGE AVENUE	<input type="checkbox"/> Add
		SUITE 800 #741	<input type="checkbox"/> Remove
		ORLANDO, FLORIDA 32801	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

OFFICER OF REGISTERED AGENT COMPANY NAME: JOHN MOSELEY.

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CLERK OF DISTRICT COURT
STATE OF TEXAS

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.

Dated January 3rd. 2024.

Patrick E. Smith

Signature of a member or authorized representative of a member

Patrick Ciauchetta

Typed or printed name of signee