Division of Corporations

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

المارية Email Address:_____

등"LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M&K FLOOR WORKS LLC

Certificate of Status	0
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Page Count	04
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Help

3/21/2024 08:37:49 PDT

To: 18506176383

Page: 2/4

Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&K FLOOR WORKS LLC				
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our rated Liability Company)	records.)		
The Articles of Organization for this Limited Liability Comp	any were filed on 02/28/24		_ and ass	igned
Plorida document number				
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 L	iability Company," the designation	"LLC" or the abbre	viation "L.	L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS	<u> </u>			
			~_	
			024	
Enter new mailing address, if applicable:		, — }	024 ISAR	
Mailing address MAY BE A POST OFFICE BOX)			2	
		(,)		~
	***************************************	r:		
B. If amending the registered agent and/or registered off	ice address on our records, e	enter the name o	ب f the _f rev	registo
agent and/or the new registered office address here:	· -	ŗ		
Name of New Registered Agent:	***************************************	-		
New Registered Office Address:				
	Enter Florida street e	iddress		
		_, Florida	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.

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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
MGR	Freemon, Kimberly	21320 Bohemian Hall Road	≝Add
		Silverhill, AL 36576	□Remove
			□Change
			□Add
			□Remove
			[]Change
			□Add
			□Remove
			[] Change
			Fladd
			□Remove
			[]Change
			□Add
			LJRemove
			□Change
			(DAdd
			□Remove
			C. C.

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ective date, if other than the neffective date is listed, the date muster. If the date inserted in this blooment's effective date on the Doment's	be specific and cannot be priced does not meet the appli	or to date of filing or more cable statutory filing r	(optional) ethan 90 days after fiting) I requirements, this date w	fursuant to 605,020 ill not be listed a
cord specifies a delayed effective s filed.	date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The	90th day after the
ed MARCH 21	. 2024			
Pa-hican	2024 Signature of a member or aut			
	Signature of a thember or aut	horized representative of	a member	