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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SALVATORI LAW OFFICE, PLLC

Account Number : 120170000055 Phone : (239)308-9191

: (239)552-4185 Fax Number

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

Email Address: \_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ELEGANTE WIDE PLANK FLOORING LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Elegante Wide Plank Flooring LLC		
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L24000225251</u> .	my were filed on May 4, 2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or	the abbreviation "L L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		
		202
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		= 3
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>enter the</u>	name of the newregiste
Name of New Registered Agent:		
New Registered Office Address:	Enter Florada street address	<u> </u>
	, Florid	la
	City:	/w Code

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

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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:

From: Sherrie Ode

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	Name	Address	Type of Action
MGR	Garsy K. Hadi	5150 TAMIAMI TRAIL NORTH, SUITE 304	□Add
		NAPLES, FL 34103	■Remove
			[]Change
MGR	Garsivaz Karimnejad Hadi	5150 TAMIAMI TRAIL NORTH, SUITE 304	<b>\</b> Add
		NAPLES, FL 34103	
			Change
			🗆 Add
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			(T. 1)

(((H24000302028.3)))

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Effective date, if other the fan effective date is listed, the Note: If the date inserted indocument's effective date of the factors and the factors are the factors and the factors are the factors and the factors are the f	date must be specifi n this block does i	e and cannot be prior not meet the applic	to date of filing or able statutory fil	nore than 90 days ing requirements	after filing.) Pursuant	to 605,0207 be listed as
record specifies a delayed d is filed.	effective date, but	t not an effective t	ime, at 12:01 a.n	n, on the earlier o	f: (b) - The 90th da	y after the
Composition +		2024	_			
Dated September 4			1			

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