L24000450255

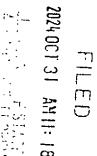
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COVER LETTER

TO:

	gistration Se ision of Cor			
ento in com.	L&L GAR	CIA'S FLOORING LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		JESUS D. GARCIA SAN'	TO	
			Name of Person	
		Ä	200	
			Firm/Company	
		5006 SPRINGWOOD DR		
			Address	
		TAMPA , FL , 33624		
			City/State and Zip Code	
		Jesusgarcia1252@gmail.co	m to be used for future annual report no	lification)
For further in	nformation c	oncerning this matter, please co		(incurrent)
JESUS D. G	ARCIA SAI	NTO	786 800-6143	
Name of Person		Area Code Daytii	ne Telephone Number	
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres gistration S		Street Address: Registration So	ection
	-	orporations	Division of Co	rporations
), Box 632		The Centre of	Tallahassee oe Street, Suite 810
Tallahassee, FL 32314		Z410 IN, IVIONIO	Je Street, Suite 810	

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

FILED

L&L GARCIA'S FLOORING LLC

2024 OCT 31 AM 11: 19

The Articles of Organization for this Limited Liability Company were filed on $\frac{10/22/2024}{10/22/2024}$ and assigned Florida document number L24000450255 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address City 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
AMBR	JESUS D. GARCIA SANTO	5006 SPRINGWOOD DR TAMPA, FL 33624	\ 🗐 Add
			□Remove
			□ Change
AMBR	JENNIFER LUJAN	14906 SW 93RD ST MIAMI, FL 33196	□Add
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
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Filing Fee: \$25.00