

M03000000541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

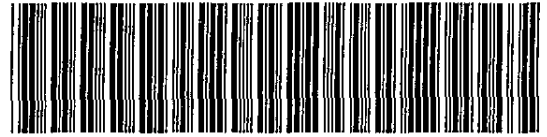
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/02/03--01013--021 \*\*25.00

RECEIVED  
03 APR -2 AM 11:07  
STATE  
SECTIONS  
TALLAHASSEE, FLORIDA

*DFC*

FILED  
03 APR -2 PM 1:07  
STATE  
TALLAHASSEE, FLORIDA

**CT CORPORATION**

April 2, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
03 APR -2 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 5821917 SO  
Customer Reference 1: 019662  
Customer Reference 2: 196312

Dear Secretary of State, Florida:

Please file the attached:

Mohawk Carpet Transportation of Georgia, LLC (DE)  
Evidence of Amendment  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton  
Sr. Fulfillment Specialist  
Jeff\_Netherton@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO  
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

FILED  
03 APR -2 0PM 13:07  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**SECTION I (1-3 must be completed)**

- 1. Name of limited liability company as it appears on the records of the Florida Department of State: Mohawk Carpet Transportation of Georgia, LLC
- 2. Jurisdiction of its organization: Delaware
- 3. Date authorized to do business in Florida: 2/12/2003

**SECTION II (4-7 complete only the applicable changes)**

- 4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? \_\_\_\_\_
- 5. New name of the limited liability company: \_\_\_\_\_
- 6. If the amendment changes the period of duration, indicate new period of duration: \_\_\_\_\_
- 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_
- 8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: FBI number is 04-3729736
- 9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Frank H. Boykin*  
Signature of a member or the authorized representative of a member

Frank H. Boykin

Typed or printed name of signer

Filing Fee: \$25.00