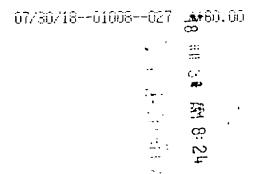
L15000317716

(Requestor's Name)
(Address)
(1000000)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Halle)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400316273224



T. CLINE

AUG - 6 5018

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Great Florida Painters, 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:	
Teresa Emmons Name of Person Great Florida Painters, LLC Firm/Company	
587 NE Maranta Terrado Address	18 34
Jensen Beach, FL 34957 City/State and Zip Code temmons 0213@gmail.com E-mail address: (to be used for future annual report notification)	5 M 0: 2
	2 1
For further information concerning this matter, please call:	
Teresa Emmons at (772) U31-5002 Name of Person 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 & Certificate of Status ☐ \$60.00 Filing Fee & Certificate Of Status ☐	of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Great Floria	da Painters, ted Liability Company as it now	LLC appears on our records.)	
	iability Company were filed	,	and assigned
This amendment is submitted to amend the foll	the new name of the limited liability company here: State A Street Address f applicable: POST OFFICE BOX) The address on our records, enter the name of the new new registered office address here: The address of the limited liability company, the designation "LLC" or the abbreviation "LPC." The address of the abbreviation "LPC." The address of the abbreviation "LPC." The address of the abbreviation "LPC." The		
A. If amending name, enter the new name o	f the limited liability comp	any here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company	," the designation "LLC" or the	abbreviation "L\(\overline{\text{C}}\)."
Enter new principal offices address, if applic			<u> </u>
(Principal office address MUST BE A STREE	T ADDRESS)		1
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and registered agent and/or the new registered o		ess on our records, <u>ente</u>	r the name of the nev
Name of New Registered Agent:	Teresa Em	mons	
New Registered Office Address:	587 NE Mai	<u>Canta Terra e</u> ter Florida street address	<u>do</u>
	Jensen Bead	Ch. Florida	34957
New Registered Agent's Signature, if changing	City Registered Agent:		ыр Соае

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 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>	Name	Address	Type of Action
<u>P</u>	Teresa Emmons	537 NE Maranta Terracio Jensen Beach, FL 34957	Add
			Remove
			Change
<u>AMB</u> R	James Van Etten II	13795 Powerline Rd Hobe Sound, FL 33475	D Add
		'	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			D Add
			© Remove
			CHange
		., ., .,	
			□ Remove
			□ Change
			□ Add
			□ Remove
		•	Change
			Add
			Remove
			☐ Change

			
		<u> </u>	<u> </u>
		- ::	##P
		•	<u> </u>
			3: 2I
		-	—— —
			
	ective date, if other than the date of filing:	D	-• • · · · · · · · · · · · · · · · · · ·
Not	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date		
doc	ument'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. o	on the	earlier
	ne 90th day after the record is filed.		
	2/21/19		
Dat	ed 7/24/18		
	111100 6111		

Page 3 of 3

Filing Fee: \$25.00